## **2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P05000073637** 1. Entity Name KRISTINE MICHAEL SOUTH BEACH, INC. Principal Place of Business Mailing Address 7271 RED ROAD 7271 RED ROAD MIAMI, FL 33143 MIAMI, FL 33143 A ARRIGAN ESCANDE AND AND ARREST AND ARREST DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent BONNER, JEANIE P. 7271 RED ROAD MIAMI, FL 33143

**FILED** Mar 26, 2007 08:00 AM **Secretary of State** 

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|  |   |  |              | 03082007 No Chg-P CR2E034 (11/05) |                          |               |                                   |  |  |
|--|---|--|--------------|-----------------------------------|--------------------------|---------------|-----------------------------------|--|--|
| C  | DO NOT WRITE IN THIS SPA  |  |              | 4. FEI Number<br>20-2873633       |                          |               | Applied For Not Applicable        |  |  |
|  |   |  |              | 5. Certificate                    | of Status Desired        |               | \$8.75 Additional<br>Fee Required |  |  |
|  | 6. Name and Address of Current Regis  | tered Agent  |              |                                   |                          |               |                                   |  |  |
| BONNER,<br>7271 RED<br>MIAMI, FL                 |   |  |              | _                                 | NOT W<br>THIS SP         |               |                                   |  |  |
|  | e named entity submits this statement for the p<br>tions of registered agent. | Durpose of changing its registered of                    | fice or r    | egistered agent, or bo            | oth, in the State of Flo | rida. I ar    | n familiar with, and accept       |  |  |
| SIGNATURE.                                       | Signature, typed or printed name of registered agent and titla                | f applicable (NOTE: Registered Ager                      | nt eignature | required when reinstating)        |                          | DATE          |                                   |  |  |
|  | E NOW!!! FEE IS \$150.00<br>ay 1, 2007 Fee will be \$550.00                   | Election Campaign Financing     Trust Fund Contribution. |              | \$5.00 May Be<br>Added to Fees    |                          |               |                                   |  |  |
| 10.  | OFFICERS AND DIREC  | CTORS  |              |                                   |                          |               |                                   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D BONNER, JEANIE P. 7271 RED ROAD MIAMI, FL 33143 D HINTERKOPF, BARBARA       |  |              |                                   | U000006<br>04/03/07-8    | 79213<br>0029 | 3<br>-004 150.00                  |  |  |
| STREET ADDRESS<br>CITY-ST-ZIP                    | 7271 RED ROAD<br>MIAMI, FL 33143  |  |              |                                   |                          |               |                                   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP            |   |  |              | DO                                | NOT W                    | RIT           | Έ                                 |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP            |   |  |              | IN '                              | THIS SP                  | AC            | E                                 |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP            |   |  |              |                                   |                          |               |                                   |  |  |
| TITLE<br>NAME                                    |   | :  |              |                                   |                          |               |                                   |  |  |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all others like empowered.

SIGNATURE:

10.

TITLE NAME

TITLE NAME

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