


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2007 8:00 am
Secretary of State

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8/

08-20-2007 90055 006 ***550.00
05-08-2007 90018 020 ***150.00

DOCUMENT # P06000101670	
1. Entity Name SIGGY'S BEACHSIDE, INC.	

Principal Place of Business 1462 HIGHWAY A1A SATELLITE BEACH, FL 32937	Mailing Address 1462 HIGHWAY A1A SATELLITE BEACH, FL 32937
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66021612



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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07122007 Chg-P CR2E034 (12/06)

4. FEI Number 20-5321528	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KIRSCHENBAUM, JACK A 1800 WEST HIBISCUS BLVD. SUITE 138 MELBOURNE, FL 32901	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when registering) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 recorder 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 or without authority empowered.

SIGNATURE:  **PROSIDENT** 8/16/07 321-777-2623
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #