## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000156361

Entity Name: BEACH LABOR., INC

FILED Apr 24, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1014 AIRPORT RD UNIT 161 4000 DANCING CLOUD CT DESTIN, FL 32541

#2

DESTIN, FL 32541

**Current Mailing Address: New Mailing Address:** 

4000 DANCING CLOUD CT 1014 AIRPORT ROAD

**UNIT 161** 

DESTIN, FL 32541 DESTIN, FL 32541

FEI Number: 20-8302637 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANTOS NASCIMENTO, JOAO BATISTA D SANTOS NASCIMENTO, JOAO BATISTA D

1014 AIRPORT ROAD 4000 DANCING CLOUD CT **UNIT 161** 

DESTIN, FL 32541 US DESTIN, FL 32541 US

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.

SIGNATURE: 04/24/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: ARAUJO, ELOISA LIMA ARAUJO, ELOISA LIMA Name: Name: 710 LEGION DR. H-2 Address: 4000 DANCING CLOUD CT #2 Address:

DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541 City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete SANTOS NASIMENTO, JOAO BATISTA D SANTOS NASIMENTO, JOAO BATISTA D Name: Name:

1014 AIRPORT RD UNIT 161 Address: 4000 DANCING CLOUD CT # 2 Address:

DESTIN, FL 32541 DESTIN, FL 32541 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: ELOISA LIMA ARAUJO 04/24/2008