

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90214 046 ***150.00

DOCUMENT # P07000104305 1. Entity Name BEACHSIDE REAL ESTATE SALES INC																															
Principal Place of Business # 505 220 MACFARLANE DR DELRAY BEACH, FL 33483 US		Mailing Address # 505 220 MACFARLANE DR DELRAY BEACH, FL 33483 US																													
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. # 505 City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. # 505 City & State Zip Country																													
4. FEI Number 26-1107122		Applied For <input type="checkbox"/> Not Applicable																													
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		03242008 Chg-P CR2E034 (12/06)																													
6. Name and Address of Current Registered Agent FELICETTI, JEANNINE 220 MACFARLANE DR # 505 DELRAY BEACH, FL 33483		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																													
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 <u>Jeannine Felicetti, Jeannine Felicetti</u> 3/28/08 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))</small>																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																													
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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 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 other like empowered. SIGNATURE <u>Jeannine Felicetti, Jeannine Felicetti</u> 3/28/08 715-7111 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone</small>																															