

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000008899

Entity Name: BEACH MART, INC.

FILED  
Jan 15, 2005  
Secretary of State

**Current Principal Place of Business:**

5297 GULF BLVD  
SAINT PETERSBURG, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

7861 BAYOU CLUB BLVD  
LARGO, FL 33777

**New Mailing Address:**

FEI Number: 59-3157494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LUPER, ZVI  
7861 BAYOU CLUB BLVD  
LARGO, FL 33777 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LUPER, ZVI  
Address: 7861 BAYOU CLUB BLVD  
City-St-Zip: LARGO, FL 33777

Title: VP ( ) Delete  
Name: LUPER, HANAN  
Address: 7347 SAWGRASS POINT DR.  
City-St-Zip: PINELLAS PARK, FL 33782

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: ZVI STEVE LUPER

PRES

01/15/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date