

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

05 MAY - 1 PM 1:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # **P93000037105 (2)**

**THE SOUTH BEACH DESIGN GROUP, INC.**

1. Name of Applicant 420 LINCOLN RD S385 MIAMI BEACH FL 33139 US	2. Name of Registrant 420 LINCOLN RD S385 MIAMI BEACH FL 33139 US	3. Date of Application 05/24/1993	4. Date of Filing 04/29/1994
21. 701 Lincoln Road	26. 701 Lincoln Road	4. Filing Fee 65-0420719	5. Contribution to State \$8.75 Additional Fee Required
22. Suite 104	27. Suite 104	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	7. This corporation is authorized to solicit contributions from the public Florida Statutes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
23. Miami Beach, FL	28. Miami Beach, FL	9. Name and Address of Current Registered Agent	
24. 33139	29. 33139	10. Name and Address of New Registered Agent	
25. Dade	30. Dade		

11. GUEDES, EDWARD G 2665 S BAYSHORE DR #204 MIAMI FL 33133	B1 Name
	B2 Street Address (P.O. Box Number is Not Acceptable)
	B3
	B4 City, State, Zip FL 33133

11. This corporation is authorized to solicit contributions from the public. If the corporation is not authorized to solicit contributions from the public, the corporation must file a statement of authorization for the purpose of changing its registered office to a location outside of the state of Florida. The corporation must file a statement of authorization for the purpose of changing its registered office to a location outside of the state of Florida. The corporation must file a statement of authorization for the purpose of changing its registered office to a location outside of the state of Florida.

12. ADDITIONAL REGISTERED AGENTS	13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS
DV LIVINGSTONE, BARRIE H 531 W 30TH ST MIAMI BEACH FL 33140 DP RAESSLER, R. C 3025 ROYAL PALM AVE MIAMI BCH FL	CEO Roamer, Robert V. 12775 Sabana Pine Way West Palm Beach, FL 33414
NAME ADDRESS CITY STATE ZIP	NAME ADDRESS CITY STATE ZIP
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14. I, the undersigned, being a duly qualified and authorized officer or director of the corporation, hereby certify that the foregoing is a true and correct copy of the information required to be filed with the Secretary of State. I am a resident of the State of Florida and I am qualified to file this statement of information. I am a resident of the State of Florida and I am qualified to file this statement of information. I am a resident of the State of Florida and I am qualified to file this statement of information.

SIGNATURE:

5/1/95 (305) 672-8800