

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037105

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** THE SOUTH BEACH DESIGN GROUP, INC.

**Current Principal Place of Business:**

701 LINCOLN RD  
STE 105  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

601 N.E. 36TH STREET  
SUITE 1712  
MIAMI, FL 33137 US

**Current Mailing Address:**

REFLECTIONS TOWER - SUITE 300  
400 SOUTH AUSTRALIAN AVENUE  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

**FEI Number:** 65-0420719      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SCHNEIDER, ESQ., JOHN C  
REFLECTIONS TOWER - SUITE 300  
400 SOUTH AUSTRALIAN AVENUE  
WEST PALM BEACH, FL 33401 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

**OFFICERS AND DIRECTORS:**

**Title:** DPS  
**Name:** RAESSLER, ROBERT C  
**Address:** 601 N.E. 36TH STREET, SUITE 1712  
**City-St-Zip:** MIAMI, FL 33137

**Title:** DC  
**Name:** RAESSLER, ROBERT V  
**Address:** 3616 FLAMINGO DRIVE  
**City-St-Zip:** MIAMI, FL 33140

**Title:** DVP  
**Name:** GUZMAN, ANDRES O  
**Address:** 601 N.E. 36TH STREET, SUITE 1712  
**City-St-Zip:** MIAMI, FL 33137

I hereby 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 all other like empowered.

SIGNATURE: ROBERT C. RAESSLER

PCEO

04/24/2012

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

\_\_\_\_\_ Date