FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P930000H95a4

Beachaide Apartments Motel, Inc.

Pencipal Place of Business

Mailing Address

FILED May 15 1997 8:00am Secretary of State

310 SCOH St. HOllywood, II 330	310 500 19 Hollywa	H 6+. 52019	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address	-	4. FEI Number	Applied For
Sute, Apt # etc	Suite, Apt. #, etc.		65-0419163	Not Applicable
22]	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Orly & State 23	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25	Zip 29	Country 30	This corporation has liability for in Florida Statutes	
9. Name and Address of (Current Registered Agent		10. Name and Address of New Reg	istered Agent
- 1	1 ~	81 Name		
		ess (P.O. Box Number is Not Acceptable)		
310 GCOH St.		83		
HOILMOOD, FI	33019			·····
		84 City		FL 85 Zip Code
 Pursuant to the provisions of Sections 6t office or registered agent, or both, in the agent. Lemitarist or with, and accept the 	i State of Florida. Such change was	authorized by the corporation	vation submits this statement for the punis board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE Signature (specific pointed rise and riggist	oral agent and the if are beauty	TE Registered Agent signature require	duction report to pa	DATE
	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	DATE RS AND DIRECTORS IN 12
ma D .	☐ DELETE	1 1 TITLE		Change Addition
NAME Dender Co	rd R	1.2 NAME		
SHOUNDERS 310 SCOTT 6	+.	13 STREET ADDRESS		
CLE S ME HOLLAMOOD	, FI 33019	1 4 CITY - ST - ZIP		
17(1	OELETE	21 TITLE		☐ Change ☐ Addition
SBREAMERAS		2 2 NAME 2 3 STREET ADDRESS		
CIY SEZIP		2 4 CITY-ST-ZIP		
ne	DELETE	31 TITLE		Change Addition
NAMC		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
10:15 + \$1 / 200	T DELETE	3 4. CITY-ST-ZIP		
TIE:	DELETE	4.1 TITLE		L. Change L. Addition
NAME STREET STRE		4 2 NAME		
CITY SILVE		4.3 STREET ADDRESS 4.4 CITY - SI - ZIP	ŗ	
20 E	☐ DEIFTE	51 HILE	~ 11 ×	Change Addition
N2M1		5.2 NAME	Min's	
5191 EL A (09) S3		5 3 STREET ADDRESS	Y (,/>	
tiny St. 7 P	·····	5.4 CITY-ST-ZIP	Ŋ	
165-F	OETE1E	6.1 TITLE		Change Addition
MARK!		6.2 NAME	000000219:	3920
SMF-1A ORGAN		6.3 STREET ADORESS	00000219: -05/28/970111 ***165.00	0025
(0°Y 51-70)	raplied with this filing does not a la	6.4 CITY - ST - ZIP	****] [5] . [1] n Section 119.07(3)(r), Florida Statutes.	

Tarnar officer or director of the corporation approximate an accurate and accurate and mainting signature shall have the same legal effect as if made under of Tarnar 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 12 or Block 12 or Block 13 if changed, or on an attachment with an address.