## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Jul 07, 2004 08:00 AM **Secretary of State** DOCUMENT # P94000045226 Entity Name SOUTH BEACH BRONZE, INC. Principal Place of Business Mailing Address PO BOX 546225 12605 CYPRUS RD N MIAMI, FL 33181 MIAMI. FL 33154 and the second s 07012004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0548528 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CHARNEY, KEITH DO NOT WRITE 12605 CYPRUS RD N MIAMI, FL 33181 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE 13 \$150.00 In accordance with \$, 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE CHARNEY, KEITH MANE 12605 CYPRUS RD STREET ADDRESS CMY-ST-ZIP N MIAMI, FL 33181 TITLE 000000163671 07/07/04-80012-006 158.75 NAME CHARNEY, MARILYN STREET ADDRESS 12605 CYPRUS RD CITY-ST-ZIP N MIAMI, FL 33181 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing goes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental leport is true and fical many 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 write employment by 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 write all generality and the same statement with an address.

SIGNATURE:

CTTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED**