


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000057858

1. Entity Name
SOUTH BEACH SOLUTIONS INC.



Principal Place of Business 320 NEWFOUND HARBOR DR MERRITT ISLAND, FL 32952 US	Mailing Address C/O JA LAROSSA CPA PC 505 EIGHTH AVE., 12A NEW YORK, NY 10018 US
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DO NOT WRITE IN THIS SPACE



02212006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0511638

Applied For	
Not Applicable	

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FLOYD, PATRICK
320 NEWFOUND HARBOR DR
MERRIT ISLAND, FL 32952**

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EDWARDS, ELIZABETH %JA LAROSSA CPA PC 505 8TH AVE NEW YORK, NY 10018
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EDWARDS, KEITH %JA LAROSSA CPA PC 505 8TH AVE NEW YORK, NY 10018
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03/28/06-00001-006 150.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elizabeth Edwards* **Elizabeth Edwards, President 3-10-06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

003-357