

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 09, 1999 8:00 am  
Secretary of State

04-09-1999 90061 044 \*\*\*150.00

DOCUMENT # P96000007743

1. Corporation Name  
BEACH MAGAZINE, INC.

Principal Place of Business  
12916 BARROW ROAD  
NORTH PALM BEACH FL 33408

Mailing Address  
12916 BARROW ROAD  
NORTH PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1996

4. FEI Number  
65-0638198

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election-Campaign-Financing-  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 513 U.S. HIGHWAY 1  
Suite, Apt. #, etc.

26 513 U.S. Highway 1  
Suite, Apt. #, etc.

22 Suite 222  
City & State

27 Suite 222  
City & State

23 North Palm Beach, FL  
Zip Country

28 North Palm Beach, FL  
Zip Country

24 33408 25 USA

29 33408 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WIEGAND, KEITH  
12916 BARROW RD  
N P B FL 33408

81 Name

KEITH WIEGAND

82 Street Address (P.O. Box Number is Not Acceptable)

513 U.S. Highway 1

83

Suite 222

84 City

North Palm Beach

FL

85 Zip Code

33408

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME WIEGAND, KEITH C  
STREET ADDRESS 12916 BARROW ROAD  
CITY-ST-ZIP NORTH PALM BEACH FL 33408

1.1 TITLE President  
1.2 NAME Keith Wiegand  
1.3 STREET ADDRESS 513 U.S. Highway 1 Suite 222  
1.4 CITY-ST-ZIP North Palm Beach, FL 33408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

KEITH WIEGAND  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 4-5-99

561-848-2090  
Daytime Phone #

0367402

CR2E034 (11/98)