

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000012493

Entity Name: BEILS, INC.

FILED  
Aug 04, 2005  
Secretary of State

## Current Principal Place of Business:

12550 BISCAYNE BLVD., STE. 204  
NORTH MIAMI, FL 33181 US

## New Principal Place of Business:

## Current Mailing Address:

12550 BISCAYNE BLVD., STE. 204  
294  
NORTH MIAMI, FL 33181 US

## New Mailing Address:

FEI Number: 65-0652320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SISSO, ALBERTO  
4400 N FEDERAL HWY  
SUITE #4  
BOCA RATON, FL 33431 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KOSA, JORGE K  
Address: 12550 BISCAYNE BLVD., STE. 204  
City-St-Zip: NORTH MIAMI, FL 33431

Title: VP ( ) Delete  
Name: SISSO, ALBERTO  
Address: 12550 BISCAYNE BLVD., STE. 204  
City-St-Zip: NORTH MIAMI, FL 33431 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: KLEIN, JORGE  
Address: 12550 BISCAYNE BLVD., STE. 204  
City-St-Zip: NORTH MIAMI, FL 33181

Title: VP (X) Change ( ) Addition  
Name: SISSO, ALBERTO  
Address: 12550 BISCAYNE BLVD., STE. 204  
City-St-Zip: NORTH MIAMI, FL 33181 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JORGE KLEIN KOSA

D

08/04/2005

Electronic Signature of Signing Officer or Director

Date