2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000024367

1. Entity Name

SOUTH BEACH MORTGAGE, INC.



Principal Place of Business

Mailing Address

450 EAST LAS OLAS BLVD. SUITE 1500 FORT LAUDERDALE, FL 33301 450 EAST LAS OLAS BLVD. SUITE 1500 FORT LAUDERDALE, FL 33301

FILED Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90230 019 ***150.00

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No Chg-P

CR2E034 (11/05)

Daytime Phone #

			 	
4.	FEI Number		Applied For	
	65-0650023		 Not Applicable	
5.	Certificate of Status Desired		 75 Additional Required	

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HUIZENGA HOLDINGS INC 450 EAST LAS OLAS BLVD # 1500 FORT LAUDERDALE, FL 33301

DO	NOT	WRITE
iN	THIS	SPACE

3. 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								
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing \$5.00 M. Added to F					
10.	OFFICERS AND DIREC	TORS						
itle Iame Street address City-St-Zip	VT BRANDEN, CRIS V 450 EAST LAS OLAS BLVD., 15 FLOO FORT LAUDERDALE, FL 33301	DR						
ITLE VAME STREET ADDRESS CITY-ST-ZIP	DP HUIZENGA, WAYNE H JR 450 E. LAS OLAS BLVD. 15 FLOOR FORT LAUDERDALE, FL 33301							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HANDLEY, RICHARD L 450 E. LAS OLAS BLVD. 15 FLOOR FORT LAUDERDALE, FL 33301	DO NOT WRITE						
ITLE IAME STREET ADDRESS CHY-ST-ZIP				IN THIS SPAC	E			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					į			
ITLE IAME STREET AODRESS CITY-ST-ZIP								
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 thistoe empowered to 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, with all other like empowered.								

Cris V. Branden

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR