1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90027 005 ***150.00

DOCUMENT # P97000021486

1. Corporation Name

HOLLYWOOD BEACH CONSULTANTS, INC.

	•								
Principal Place of Business Malling Address									_
803 TYLER STREET 803 TYLER STREET									
HOLLYWOOD F: 33019 HOLLYWOOD F: 33019						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						03/07/1997		Ţ	
Principal Place of Business 2a. Mailing Address						4, FEI Number		pplied For	
_ `	lace of Business	26	<u> </u>			65-0733052		lot Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.						Additional	
22	m, 610.	27	¬ '''			5. Certifcate of Status Desired ,	-	tequired	
City & Stat	e ·	City & State				6. Election Campaign Financing	\$5.00	May Be	
23	_	28	8			Trust Fund Contribution		to Fees	
Zip	Country	Zip	1			8. This corporation owes the current year Intangible			
24	25 29 30					Personal Property Tax.	Yes	□No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
					Name				
CORPORATE CREATIONS ENTERPRISES, INC.				32	Street Addre	ess (P.O. Box Number is Not Acceptable)			
4521 PGA BLVD. #211			`	^	Oli COL Floare	(1 ; S. Box Hallise to West temperator)			
PALI	M BEACH GARDENS FL 33418		1	33				ļ	
			۱,	34	City		85 Zip	Code	
					•	FL	_		
_11. Pursuant	to the provisions of Sections 607.0502	and 607-1508 Florida Statutes	the abo	ove	named corpo	pration submits this statement for the purpose of	changing if	s_registered	
office or r agent. I a	egistered agent, or both, in the State om m familiar with, and accept the obligation	of Florida. Such change was autions of, Section 607.0505, Florid	nonzea i la Statut	oy t es.	ne corporation	n's board of directors. I hereby accept the appo	munom as i	cystered	
SIGNATURE	,								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered A	gent	signature required				
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT Change		
TITLE	D ANDROUND ANGUADIA	☐ DELETE	1.1 TITLE				Change	- D Addition	
NAME	CARRACINO, NICHOLAS		1.2 NAME					}	
STREET ADDRESS	803 TYLER STREET				ADDRESS				
CITY-ST-ZIP	HOLLYWOOD F; 33019		1.4 CITY-5		-Z!P		[] Change	Addition	
TITLE	D WEAVED CHOAN	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREE				[] change	Addition	
NAME	WEAVER, SUSAN							}	
STREET ADDRESS	803 TYLER STREET	•			1			-	
CITY-ST-ZIP	HOLLYWOOD F; 33019	DELETE	2. 4 CITY-		T-ZIP	- Auto-Markette	☐ Change	Addition	
TITLE			3.1 TITLE			•	onange	, Druguion	
NAME			3.2 NAME		4000000			ł	
STREET ADDRESS					ADDRESS	•			
CITY-ST-ZIP		☐ DELETE	3.4. CIT		1-ZIP		Change	Addition	
TITLE		☐ NETE IE	4.1 TITL				□ 'ouran'a	, LJ, Nadiscon,	
NAME			4. 2 NA		4000000				
STREET ADDRESS		•	1		ADDRESS				
C/TY-ST-ZIP	2 2 2 4 4 2	- DELETE	4.4 CITY		-ZIP		Change	Addition	
TITLE	1	Correct	5.1 ISIL	_		·			
NAME STREET ADDRESS	·		1		ADDRESS	·	•	. }	
STREET ADDRESS			5.4 CITY		1			{	
CITY-ST-ZIP		☐ DELETE	6.1 TITL			 	☐ Change	Addition	
TITLE			6.2 NAN						
NAME					ADDRESS			j	
STREET ADDRESS			6.4 CITY]	
CUTY OT 71D									

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 a pattachment with an address, with all other like empowered.

SIGNATURE: