## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

**PROFIT** CORPORATION ANNUAL REPORT

1999



## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000100567

1. Corporation Name

BEAT INVESTMENTS, INC.	

Principal Place of Business Mailing Address

1135 PASADENA AVE. SOUTH. STE. 304 ST. PETERSBURG FL 33707

2. Principal Place of Business

21

1135 PASADENA AVE. SOUTH, STE. 304 ST. PETERSBURG FL 33707

2a. Mailing Address

26

## May 10, 1999 8:00 am Secretary of State

05-10-1999 90144 024 \*\*\*150.00



1 (BANDA) (16 (BI), 1884 BIN BIN BIN BIN 1890 (BIN BIN BIN BIN BIN BIN BIN BIN BIN BIN	
DO NOT WRITE IN THIS SPACE	

Applied For

Not Applicable

3. Date Incorporated or Qualifed

11/24/1997

59-3480932

4. FEI Number

Suite, Apt.:	#, etc.	Suite, /	чрі. #, еіс.			5. Certifcate of Status Desired	Additional	
22		27	<u>.</u>				Fee Re	
City & State	е	City &	City & State			<ol><li>Election Campaign Financing</li></ol>	<b>□</b> \$5.00	
23		28	<u> </u>			Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip—	-Zip ~ _ Country				· <u>-</u>	<del></del>
24	25	29	29 30			Personal Property Tax.	Yes	□No
	9. Name and Address of Current F	Registered A	gent			10. Name and Address of New Re	gistered Agent	
4.71/1				81	Name			
ATKINS, J. THOMAS				82	82 Street Address (P.O. Box Number is Not Acceptable)			
318 LING-A-MOR TERRACE SOUTH ST. PETERSBURG FL 33705								
			83					
				-			85 Zip (	Code
				84	City		FL S 2 2	Joue
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508	, Florida Statutes,	the abov	e-named corp	poration submits this statement for the pr	irpose of changing its	registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida, Such	i change was auth	orized by	the corporati	ion's board of directors. I hereby accept	the appointment as re-	gistered
·	m tamiliar with, and accept the obligation	ais oi, seciloi	1 007,0000, Florida	a Statutes	),			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable	(NOTE: Re	gistered Age	nt signature require	ed when reinstating)	DATE	{
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	RS IN 12
TITLE	D		☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	ATKINS, J. THOMAS			1.2 NAME				
STREET ADDRESS	318 LING-A-MOR TERRACE SOU	TH		13 STREE	TADDRESS			
	ST. PETERSBURG FL 33705	(1) (		1.4 CITY-S				
CITY-ST-ZIP TITLE	D		DELETE	2.1 TITLE	11-211		☐ Change	Addition
	•		- OCC.,C	2.2 NAME				_
NAME	BECK, WILLIAM L				T 1000000			
STREET ADDRESS	200 58TH AVE.				TADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33706		DELETE	2. 4 CITY-: 3.1 TITLE	ST-ZIP		Change	Addition
TITLE					_			
NAME				32 NAME	}			
STREET ADDRESS					T ADDRESS			i
CITY-ST-ZIP				3.4. CITY-	ST-ZIP		Character Character	- Addition
TITLE			☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME				4, 2 NAME				
STREET ADDRESS				4.3 STREE	T ADDRESS			j
CITY-ST-ZIP				4.4 CITY- S	T-ZIP			
TITLE			DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREE	TADDRESS			j
CITY-ST-ZIP				5.4 CITY- 9	ST-ZIP			
TITLE			☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME				6.2 NAME				ľ
STREET ADDRESS				6.3 STREE	T ADDRESS			
				6.4 CITY-5	ST-ZIP			
CITY-ST-ZIP		this filing dos	a ant evalify for th			Section 119 07/3\(i) Florida Statutes 1 f	urther certify that the i	nformation

inereby certify that the information supplied with this limit developed for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hinter 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 an anyattachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)