## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2007 08:00 AM Secretary of State

DOCUMENT	#	P <u>9</u> 700	00	10	07	72
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1. Entity Name FLORIDA BEACH & SUN, INC.



US

Principal Place of Business

1029 NE 12TH STREET CAPE CORAL, FL 33909 US Mailing Address

1029 NE 12TH STREET CAPE CORAL, FL 33909

Dept. of State

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02072007 No Chg-P CR2E034 (11/05)

4. FEI Number Ar

65-0849228

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MUELLER, ROMAN 1029 NW 12TH STREET CAPE CORAL, FL 33909

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	'Signature, typed or printed name of registered agent and little it	applicable. (NOTE: Registere	d Agent signature	required when reinstating)	DATE
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$556.00	9. Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	I	<del></del>	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	DP MUELLER, ROMAN 1029 NE 12TH STREET CAPE CORAL, FL 33909				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000635563 02/23/07-80019-012 150.00
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TITLE NAME STREET ADDRESS CITY+ST+ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true ago 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 truebes empowered to effect 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 tike empowered.

SIGNATURE:

STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/07 (239/292