

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000021205

Entity Name: MISTY BEACH, INC.

FILED
Jun 08, 2005
Secretary of State

Current Principal Place of Business:

420 LINCOLN ROAD
305
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

420 LINCOLN ROAD
305
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0818833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAREDES, MIGUEL
420 LINCOLN ROAD
305
MIAMI BEACH, FL 33139 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PAREDES, MIGUEL
Address: 12401 PINE NEEDLE LANE
City-St-Zip: PINECREST, FL 33156

Title: VD () Delete
Name: ROSARIO PAREDES, JOYCE
Address: 12401 PINE NEEDLE LANE
City-St-Zip: PINECREST, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PAREDES, MIGUEL
Address: 12401 PINE NEEDLE LANE
City-St-Zip: PINECREST, FL 33156

Title: PVD (X) Change () Addition
Name: ROSARIO PAREDES, JOYCE
Address: 12401 PINE NEEDLE LANE
City-St-Zip: PINECREST, FL 33156

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: JOYCE PAREDES

PVD

06/08/2005

Electronic Signature of Signing Officer or Director

Date