

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P98000036019

1. Entity Name  
BEACH-BRY, INC.



Principal Place of Business  
2800 NW 75TH TERR  
MARGATE, FL 33063

Mailing Address  
2800 NW 75TH TERR  
MARGATE, FL 33063

FILED  
05 JUL 12 PM 4:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



07072005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0832438

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

GROSSBAUCH, MURRAY  
2800 NW 75TH TERR  
MARGATE, FL 33063

**DO NOT WRITE  
IN THIS SPACE**

8. 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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME GROSSBAUCH, MURRAY  
STREET ADDRESS 2800 NW 75TH TERR  
CITY-ST-ZIP MARGATE, FL 33063

TITLE SVP  
NAME GROSSBAUCH, LUISA  
STREET ADDRESS 2800 NW 75TH TERR.  
CITY-ST-ZIP MARGATE, FL 33063

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

600057476826  
07/14/05--01060--009 \*\*150.00

**DO NOT WRITE  
IN THIS SPACE**

8/7/12

12. 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 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 trustee 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.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



**BEACH BRY INC.**  
**2800 NW 75TH TERRACE**  
**MARGATE, FL 33063**  
**FAX & PHONE:**  
**(954) 34 5-3010**

Florida, July 6, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FEI # 65- 0832438

Mr. Sean Toner:

As per our conversation I enclose a new check # 2236 for the amount of \$ 150.00, to cover the corporation annual filing fee for 2005.

I enclose the post office copy proof of delivery, sent on 4-25-05 and received and signed on 4-28-05.

Looks that the original payment was lost..

Please, credit our account accordingly.

Thank you, very much for your cooperation.

Cordially.

MURRAY GROSSBAUCH