FILED Aug 25, 2003 8:00 am § Secretary of State

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

| 1. Entity Nam | MENT # P990(RONT ENTERPRISES, INC. | 00011929 D | | 08-25-2003 90095 027 ***1 | | |
|---|---|--|---------------------------------------|---|--------------------------------|--|
| Principal Place of Business 20801 BISCAYNE BOULEVARD SUITE 505 AVENTURA FL 33180 | | Mailing Address 20801 BISCAYNE BOULEVARD SUITE 505 AVENTURA FL 33180 | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | CHECK HERE IF MAKING CHANG | ☐ CHECK HERE IF MAKING CHANGES | |
| City & State | | City & State | | 4. FEI Number 65-0893709 | Applied For Not Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired S8.75 | Additional | |
| | 6. Name and Address of Current | Registered Agent | | 7. Name and Address of New Registered Agent | | |
| PERLOW, JEFFREY M 20801 BISCAYNE BOULEVARD # 505 MIAMI FL 33180 | | | Name Street Ad | Name Street Address (P.O. Box Number is Not Acceptable) | | |
| | · | | City | FL Zip | Code | |
| SIGNATURE F | Signature, typed or printed name of registered agen ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$750 c Payable to Florida Department of | 0.00 | OTE: Registered Agent signature | 9. Election Campaign Financing \$ | 5.00 May Be | |
| 10. | OFFICERS AND | DIRECTORS | 11. | ADDITIONS/CHANGES TO OFFICERS AND DIRECT | FORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BESTOSO, EDMOND J 20801 BISCAYNE BOULEVARD AVENTURA FL 33180 | ☐ Delete # 505 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | _ Char | nge | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPDS REGAN, KELLY 20801 BISCAYNE BOULEVARD AVENTURA FL 33180 | ☐ Delete # 505 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Char | nge Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD PISANO, THOMAS 20801 BISCAYNE BOULEVARD, AVENTURA FL 33180 | ☐ Delete # 505 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | □ Char | nge Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Char | nge 🔛 Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | □ Delete | TITLE NAME STREET ADDRESS CITY-SI-ZIP | □ Char | nge Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Chan | nge 🔲 Addition | |

12. I hereby certify that the information supplied with this filing does not gratify 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 pactifial 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 trusted 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, will all other the appowered.

SIGNATURE:

AHACMMENT Fromberg, Perlow & Kornik, P.A.

Attorneys at Law
Aventura Corporate Center, Suite 505
20801 Biscayne Boulevard
Aventura, Florida 33180

80140694 P99000011929

> Telephone: (305) 933-2000 Telefax: (305) 936-0101

Gary H. Kornik *
*Admitted in the Florida, Pennsylvania
and New Jersey Bars

August 21, 2003

Reinstatements
Division of Corporations
Florida Department of State
P.O. Box 1500
Tallahassee, Florida 32302

RE:

Beachfront Enterprises, Inc.

Document No. P99000011929

Dear Sir/Madam:

Enclosed is a Uniform Business Report and check in the amount of \$150.00 for the above corporation. We are requesting a waiver of the additional fees due since the original Uniform Business Report was never received.

Your attention to this matter is appreciated.

Very truly yours,

GARY H KORNIK

/ajs

Enc.