## 2004 FOR PROFIT CORPORATION

## **FILED**

ANNUAL REPORT				Secretary of State			
DOCUMENT # P99000018064					Secretar	y of State	
	BEACH TATTOO, PIERCING	& PIPES, INC.					
Principal Plac	ce of Business	Mailing Address					
11840 FRONT BEACH ROAD UNIT C 11840 FRONT BEACH ROA PANAMA CITY BEACH, FL 32407 PANAMA CITY BEACH, FL						INGUS SUITH BESIDE BHIS BINDINGS IT NEWS	
		<u> </u>				R2E034 (10/03)	
C	O NOT WRITE	CE	4. FEI Number 59-35634	40	Applied For Not Applicable		
	<u></u>		and the second second	5. Certificate of S	Status Desired	\$8.75 Additional Fee Required	
<del></del>	6. Name and Address of Current R	egistered Agent					
APPLEBAUM, STEVEN L 9108 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32408			Acceptance - Law appropries		IOT WRI IIS SPAC		
8. The above the obliga	e named entity submits this statement for tions of registered agent.	he purpose of changing its register	ed office or register	red agent, or both, it	n the State of Florida.	t am familiar with, and accept	
SIGNATURE.	Signature, typed or printed riame of registered agent en	1 title if goot-cable. (NOTE: Registers	d Agera signature required	when revisiting)		<u> </u>	
	E NOW!!! FEE 18 \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campaign Final Trust Fund Contribution.		.00 May Be ed to Fees	<del>-</del>		
18.	OFFICERS AND D	IRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SADEH, DANNY 11840 FRONT BEACH ROAD UN PANAMA CITY BEACH, FL 32407						
TITLE NAME STREET ADORESS CITY-ST-ZIP				(	000000097 03/26/04-800	124 125-017 150.00	
TRILE		· · · · · · · · · · · · · · · · · · ·	1				
NAME STREET ADDRESS							
CITY-ST-ZIP				DO N	IOT WRI	TE	
TITLE NAME STREET ADDRESS					IS SPA		
CITY-\$1-ZIP							
TITLE NAME STREET ADDRESS OTY-51-ZIP							
NITLE NAME STREET ADDRESS							

12. I hereby certify that the information supplied with this filing coes 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 ell other time empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

STATUSE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

SIGNING OFFICER OR DIRECTOR