FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S38767

2s. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

BEACH CHROME, INC.

2. Principal Place of Business

HUCKABEE, LOU 233 11TH ST

MIAMI BEACH FL 33139

Sulte, Apt. #, etc.

City & State

22

23

24

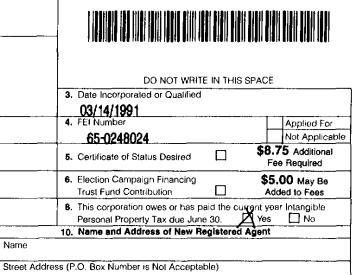
Principal Place of Business	Mailing Address
233 11TH ST	233 11TH ST

28

29

9. Name and Address of Current Registered Agent

FILED Feb 11 1998 8:00am Secretary of State



11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered

Country

81

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83 84 Name

30

agent I ar	m familiar with, and accept the obligations of, Section 607.	.0505, Florida	a Statutes.		- 5
SIGNATURE	Signature typed or printed name of registered agent and tried applicable	(NCIL Bo	nistered Agent signature	required when reinstating) DA1E	
12.	OFFICERS AND DIRECTORS	(NOTE 110	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	D DE	ELETE	1.1 TITLE	Change	☐ Addition
NAME	GEORGE, LOU	1	1.2 NAME		
STREET ADDRESS	233 11TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP		
TITLE	☐ DE	ELETE	2.1 TITLE	☐ Change	Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - \$1 - ZIP	:	
TITLE	DE	ELETE	3.1 TITLE	☐ Change	Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE	DE	ELETE	4.1 THLE	Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	DE	ELETE	5.1 TITLE	Change	Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CiTY - ST - ZiP		
TITLE	DE	ELETE	6.1 Till.E	Change	Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
1					

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if chapter 607, or on an attachment with an address

1-14-08

Zip Code