## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996	DIVISION OF C	ORPORATIONS			
DOCUN 1. Corporation		8 (8)				
BEACH	& WEST CORPORATION					
Principal Place	of Business	Mailing Address	<del>. ,</del>		TON CION EIGH BION GION GION EIGH FOOL	
941 NORTHEAST 18TH AVENUE 941 NE 19TH AVENUE						
FORT LAUDER	RDALE FL 33304	SUITE 214 FORT LAUDERDALE FL 3	2204			
		US	13304	<ol> <li>Date Incorporated or Qualified 07/01/1991</li> </ol>	3a. Date of Last Report 03/23/1995	
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0298827	Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State	· <del>·····························</del>	City & State		6. Election Campaign Financing	Fee Required  \$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for i		
24	25 9. Name and Address of Curre		30	Florida Statutes Yes  10. Name and Address of New R	No Registered Agent	
			81 Name			
			82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
941 NORTHEAST 19TH AVENUE			83			
FORT LA	UDERDALE FL 33304		83			
			84 City		FL 85 Zip Gode	
11. Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	, the above named corp	oration submits this statement for the pur	pose of changing its registered office	
or registere familiar with	ed agent, or both, in the State of Flor n, and accept the obligations of, Sec	ida. Such change was authorized ition 607.0505, Florida Statutes.	by the corporation's bo	ard of directors. I hereby accept the appoint	ointment as registered agent. I am	
SIGNATURE			n Balancia de Campio de la composito de la com			
12.	Signature, typed or printed name of registered agor OFFICERS AN	ND DIRECTORS	Registered Agent signature requ	rea when reinstating: ADDITIONS/CHANGES TO OFFI	DATE ICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1. 1 TITLE		Change Addition	
NAME	FRANZBLAU, LEONARD		1.2 NAME			
STHEE! ADDRESS	941 N.E. 19TH AVENUE		1.3 STREET ADDRESS			
CITY-SI-ZIP TITLE	FORT LAUDERDALE FL	<b>Г</b> ☐ DELETE	1.4 CHTY - ST - ZIP 2. 1 TITLE		Change Addition	
NAME	Franzblau, Mark a		2.2 NAME			
STHEE! ADDRESS	1826 E SUNRISE BLVD		2.3 STREET ADDRESS			
CITY - ST - ZIP	FT LAUDERDALE FL		2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3. 1 TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			3.2 NAME  3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP	•		
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - ST - ZIP 5. 1 TITLE		Change Addition	
NAME		C occer.	5.2 NAME			
STHEET ADDRESS			5.3 STREET AUDRESS			
CHIY-ST-ZIP			5.4 CITY-S1-ZIP			
THILE.		DELETE	6. 1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS	•		6.3 STREET ADDRESS			
14. I do hereby	certify that the information supplied	with this filing is voluntarily furnish	6.4 City-St-ZiP ned and does not qualify	for the exemption stated in Section 119.	07(3)(k), Florida Statutes. Ffurther	

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 changed, or on an attachment with an address.

SIGNATURE:

DATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

apr. 30 1996. 954-763-5519

CR2E034 (12/95)