

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 29 AM 11:46

DOCUMENT # **V27752** (7)  
1. Corporation Name  
**BEAUANSON INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address  
**34 S.E. SECOND AVENUE #701 MIAMI FL 33131**  
**169 E. FLAGLER ST STE 300 MIAMI FL 33131 US**

3. Date Incorporated or Qualified **04/10/1992** 3a. Date of Last Report **05/01/1994**  
4. FEI Number **65-0335391** Applied For  Not Applicable   
5. Certificate of Status Desreg  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This Corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
**SCHECHTER, RICHARD  
169 E. FLAGLER ST. STE 300  
MIAMI FL 33131**

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City **FL** B5 Zip Code

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (Signature) \_\_\_\_\_ (Typed Name) \_\_\_\_\_ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	NAME <b>SCHECHTER, RICHARD</b> STREET ADDRESS <b>169 E. FLAGLER ST STE 300</b> CITY, ST, ZIP <b>MIAMI FL</b>	1. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME <b>VICE-PRESIDENT</b> STREET ADDRESS <b>JILL KURMAN</b> CITY, ST, ZIP <b>P.O. Box 101</b> <b>OCCIDENTAL, CA 95465</b>	2. TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME <b>SECRETARY</b> STREET ADDRESS <b>EUGEN SCHECHTER</b> CITY, ST, ZIP <b>169 E. FLAGLER ST. #300</b> <b>MIAMI, FL 33131</b>	3. TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	4. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	5. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	6. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	7. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	NAME	8. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 (07/00), 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 changed, or on an attachment with an address.

SIGNATURE: *Eugen Schechter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**EUGEN SCHECHTER**  
Date: **3-23-95** Time: **2:05 374-7433**