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**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(7)

FLORIDA BEACH RESORT CORP.

FILED	
Jan 22 1998 8:00an	
Secretary of State	,



Principal Place of Business \$150 NORTH OCAN BLVD \$IUTE 602 POMPAND BEACH FL 3002 US  \$2 POMPAND BEACH FL 3002 US  \$3 Date Incorporation of Business \$4								
SUITE 602 FORMAND BEACH FL 33092 US  2. Minling Address   2. Minling Address   3. Date incorporation of Challed of Challed of Challed   68/01/1992 2. Principal Place of Business   2. Minling Address   4. FEI Number   Applied For   Suite, Apl. 4, etc.   5. Certificate of Status Desired   Fe. Regulard   Suite, Apl. 4, etc.   5. Certificate of Status Desired   Fe. Regulard   Suite, Apl. 4, etc.   5. Certificate of Status Desired   Fe. Regulard   Suite, Apl. 4, etc.   5. Certificate of Status Desired   Fe. Regulard   Suite, Apl. 4, etc.   5. Certificate of Status Desired   Fe. Regulard   Suite, Apl. 4, etc.   5. Certificate of Status Desired   Sa. 75. Address of Cary & State   Suite, Apl. 4, etc.   5. Certificate of Status Desired   Sa. 75. Address of Desired   Suite and Address of Current Regulared Agent   7. Suite	Principal Plac	e of Business	Mailing Address					
2. Mainty Address   2. M	SUITE 602 SUITE 602 POMPANO BEACH FL 33062 POMPANO BEACH FL 3306					3. Date Incorporated or Qualified		
Sulfo, Apt. #, Not.   Sulfo, Apt. #, Not. #, N	Dilada N	How of Duckness	Los Mallins Address					
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.   Suite, Apt #, etc.   S. Certificate of Status Desired   \$8.75 Additional Processor   \$5.00 Mey Be Additional P							<del></del>	
27 City & State 28 City & State 29 Country 29 Country 29 Country 29 Sp								
City & State    City & State   City & State   City & State   City & State   City & State   City & State   Country   Sp.   Country   Sp.   Country   Sp.   Country   Sp.   Sp.   Country   Sp.	<del> </del>					5. Certificate of Status Desired	<b>4</b>	
Zep	City & State City & State				·	6. Election Campaign Financing	\$5.00 May Be	
Section   Personal Property Tax due June 30.   Ves   No //4	<u> </u>			<del></del>		Trust Fund Contribution		
RICHARD, SYLVAIN 1500 NORT COEAN BLVD SUT3 602 POMPANO BEACH FL 33062  11. Pursuant to the provisions of Sections 607.0502 and 607.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of hanging its registered agent. or both, in the State of Florida Statutes agent. I am familiar with and accept the obligations of Sections 607.0502 and 607.1509. Florida Statutes  11. Pursuant to the provisions of Sections 607.0502 and 607.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of hanging its registered agent. I am familiar with and accept the obligations of Sections 807.0509. Florida Statutes  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. OFFICERS AND DIRECTORS  15. Time  16. PROPER ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. PROPER ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  17. TIME  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  19. ADDITIONS/CHANGES TO OFFICERS AND DI	<del>-</del>	<b>├</b>	·		ry		1m ~ 1//A	
STICHARD, SYLVAIN   1500 NORT OCEAN BLVD   SUT 3 602   POMPANO BEACH FL 33062   83   Street Address (P.O. Box Number is Not Acceptable)   84   City   FL   85   Zip Code   83   Street Address (P.O. Box Number is Not Acceptable)   84   City   FL   85   Zip Code   85   Street Address (P.O. Box Number is Not Acceptable)   85   Zip Code   86   Street Address (P.O. Box Number is Not Acceptable)   86   Zip Code   87   Street Address (P.O. Box Number is Not Acceptable)   87   Zip Code   87   Zip	24	<del></del>		130				
11			TOTAL TOGUS CO FOUND AND AND AND AND AND AND AND AND AND A	8	1 Name	IV. Hame and Address of flow flogistor	en villen	
SUIT3 602 POMPANO BEACH FL 33062  ### City FL   85   Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florids State of Flori				<u> </u>				
POMPANO BEACH FL 33062   83				8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
1. 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 agont, 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 agont, 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 agont, 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 agont, 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 agont, 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 agont, 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 agont, 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 agont, or both in the state of Florida. Such the corporation's board of directors. I hereby accept the appointment as registered agont, agont agont accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointment as registered agont. In the such accept the appointme				8	3			
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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 and accept the obligations of, Section 607.0505, Florida Statutes  SIGNATURE    Signature, lipsed or proteed reare of registered agent and little if acquireable   (NOTE Repibliced Agent signature required signat					<u></u>		<u> L                                    </u>	
NOTE   Repatitive Special product product amone of registance appert and the if any pictable   (NOTE   Repatitive special deceased Appert agrandure requised when rematricing)   DATE	office or r agent. I a	to the provisions of Sections 607.1 (egistered agent, or both, in the Stim familiar with, and accept the ob-	usto of Florida, Such change was obligations of, Section 607.0505, Florida	tes, the abo authorized l orida Statut	ve-named cor by the corpora es.	poration submist this statement for the purpos ation's board of directors. I hereby accept the	e of changing its registered appointment as registered	
TITLE					geni signalure requ			
NAME   STREET ADDRESS   1500 NORTH OCEAN BLVD STE 602   13 STREET ADDRESS   14 CITY-ST-ZIP		OFFICERS .		_		ADDITIONS/CHANGES TO OFFICERS		
13 STREET ADDRESS   1500 NORTH OCEAN BLVD STE 802   13 STREET ADDRESS   14 CITY-ST-ZIP		DICHADO GVI VAIN	L. DELETE				☐ Change ☐ Addition	
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TITLE	DOMESTIC BEACHER				1			
2.3 STREET ADDRESS   .	·						Change Addition	
CITY-ST-ZIP	NAME			2.2 NAMI				
TITLE	STREET ADDRESS			2.3 STRE	ET ADDRESS	**		
NAME	CITY-ST-ZIP			2. 4 CITY	- ST- ZIP			
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the informatio 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 a finite sec.

1/12/98