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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

V65237

DOCUMENT # V65237 (2)					
	BEACH CENTER INC.				
Principal Place of Business		Mailing Address			1884 B1811 B1811 B1811 B1811 B1811 B1811 B1811
301 YAMATO ROAD SUITE 3199 BOCA RATON FL 33431		301 YAMATO ROAD SUITE 3199 BOCA RATON FL 33431			
				3. Date Incorporated or Qualified 09/18/1992	3a. Date of Last Report 01/27/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Suite, Apt. #, etc.		65-0369438	Not Applicable \$8.75 Additional
		27		5. Certificate of Status Desired	Fee Required
City & State		Orty & State		Election Campaign Financing Trust Fund Centribution	S5.00 May Be, Added to Fees
Zip	Country	28 Zip	Country	This corporation has liability for i	
24	25	29	30	Florida Statutes Yes	
	Name and Address of Current F	Registered Agent	81 Name	10. Name and Address of New R	
LAMOTAL	FO. WOLFOANO			MARIA KACSIN	ER
	er, wolfgang Iato road		82 Street Add	ress (P.O. Box Number is Not Acceptab	¹⁶⁾ # 3199
SUITE 31			83		
	ATON FL 33431-1502		84 City ()	DIA DATON	85 ZHD C999 0
11 Purcuant to	the provisions of Soutions 607.0502 at	od 607 1508. Florida Stalutos	the above-named como	CG / /C// /C// ration submits this statement for the our	cose of changing its registered office
or registere	o the provisions of Sections 607.0502 ar ad agent, or both, in the State of Florida n, and accept the obligations of, Section	. Such change was authorized	d by the corporation's boa	rd of directors. I hereby accept the appr	bintment as registered agent. I an
SIGNATURE	n, and accept the colligations of, Section	ارمین برای المالی ا	MARIA	KAESTNER	4123196
SIGNATURE	Signature, typed or princed name of registered agont and		Fingstered Agent signature require	d when reinstating)	DATE
12. TITLE	OFFICERS AND E	DIRECTORS DELETE	13. 1.) TITLE	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	KAESTNER, WOLFGANG	Morre	1.2 NAME	TRESIDENT / DIRECTO KAESTNER, MARI 301 YAMATO RD.	A
STREET ADDRESS	301 YAMATO ROAD #3199		1.3 STREET ADDRESS	301 YAMATO RO.	-# 3199
CITY-ST-ZIP	BOCA RATON FL		1.4 CHY-ST-ZIP	BOCA RATON,	
TITLE		DELETE	2 1 Title		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	i	DELETE	2.4 CITY - ST - ZIP 3. 1 TITEE		Change Addition
NAME		L	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4 CITY - \$T - 7IP		
TITLE		☐ DELETE	4. 1 TOLE		Change Addition
NAME			4.2 NAME		•
STREET ADORESS			4.3 STREET ADDRESS		
CITY-SI-ZIP		DELETE	5 1 TITLE		Change Addition
TITLE		T perete	5 1 HILE. 5 2 NAME.		LJ Simily LJ Motion
NAME STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 C(TY - ST - ZIP		
TITLE		DELETE	6. 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		(ATIONIA FILAD FULL 1-14.4)
certify that oath; that	y certify that the information supplied wi t the information indicated on this annual I am an officer or director of the corpora a Block 12 or Block 13 if changed, or on	l report or supplemental annu ition or the receiver or trustee	ial report is true and accur empowered to execute the	ate and that my signafure shall have the	e same indal o ffect as it made under

SIGNATURE: MALL ALL STORES OFFICER OR DIRECTOR MARLES TIVE & PLEST DE NT