


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
06 MAR 28 PM 1:23
STATE
MIAMI, FLORIDA

DOCUMENT # 533525 1. Entity Name BEL-MAR PAINT CORP.	
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Principal Place of Business 2300 CORAL WAY SUITE 200 MIAMI, FL 33145	Mailing Address 2300 CORAL WAY SUITE 200 MIAMI, FL 33145
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DO NOT WRITE IN THIS SPACE



02092006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1736974	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES, INC.
 2300 CORAL WAY
 SUITE 200
 MIAMI, FL 33145

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	VTD BEHMOIRAS, RAFAEL
STREET ADDRESS	CITY-ST-ZIP	20425 NE 19TH CT. MIAMI, FL 33179
TITLE	NAME	VD BEHMOIRAS, MOISES
STREET ADDRESS	CITY-ST-ZIP	5660 COLLINS AVE. 21-C MIAMI BEACH, FL 33140
TITLE	NAME	
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	
STREET ADDRESS	CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Moises Behmoiras - MOISES BEHMOIRAS 2/10/06 305-856-0056
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #