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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J58305

(0)

BELLE GLASS & CONSTRUCTION CO.

FILED Jan 22 1997 8:00am Secretary of State



Principal Pra	ace of Business	Mailing Adgress						itori oxogi otok		
% EUGENE 3778 S.W. 1	R. LOMANDO 27TH AVE.	% EUGENE R. LOMANDO 3778 S.W. 127TH AVE.								
MIAMI FL 33 US	n 75-2808	_				02/17/1987 01/29			of Last Report	
2. Principal	Place of Business	2a. Mailing Address				4, FEI Number		<u> </u>	pplied For	
21		26				NOT APPLICABLE			lot Applicable	
Suite, Ap		Suite, Apt #, etc.				5. Certificate of Status Desired	X		Additional Required	
City & St	tate	City & State				Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for in		tax under	s. 199.032,	
24	25		30				Yes	No		
	9. Name and Address of Cur	rent Registered Agent		81	No.	10. Name and Address of New Res	istered	Agent		
	OMANDO, EUGENE R.			81	Name					
3778 S.W. 127TH AVE.				82	Street Add	ddress (P.O. Box Number is Not Acceptable)				
M	IAMI FL 33175		ļ	83	l					
				03						
				84	City		FL	85 Zip	Code	
office o agent SIGNATURI	I am familiar with, and accept the of	ate of Florida Such change was a oligations of, Section 607,0505, Flor or Florida National Section 607,0505, Florida National Section 1	uthorized rida Stat	d by utes	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	t the app	iointment a	s registered	
SIGNATORI	Styriation, typed or printed name of registered		: Registere	d Age	nt signature requi	irød when reinstaling)	DATE			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
THEF	D POLITICAL D	☐ DELETE	1.1 ₹(Change	Addition	
NAME	LOMANDO, EUGENE R. ss 3778 S.W. 127TH AVE		1.2 N/		1000000					
STREET ADORES	MIAMI FL		1		ADDRESS					
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NAME STREET ANGLES	ec.		6.2 N/		Annacco					
STREET ADDRES	93		1		ADDRESS					
C-TY - S1 - ZIP		had a fit time day not exclu			ST-ZIP	d in Section 119 07/3Vi) Florida Statuto	. I formation	a autifu the	- 4 4h -	

a concretely certify that the information supplied with this thing does not qualify for the exemption stated in Section 119.07(3)(i), 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

SMATURE AND TYPE OF PRIMED NAME OF SIGNING OFFICER OR DIRECTOR

46 8 WE LOTH NV 60

Date

Date