FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J58305

(0)

FILED Feb 09 1998 8:00am Secretary of State

| BELLE GLASS & CONSTRUCTION CO. | | | | I OTANIA TIPI ANYA TAMA INI ANYA TINI ANYA TINI | AN BIAN AWAN AND BIAN AAA |
|--|--|--------------------------------------|--------------------------------|--|-----------------------------------|
| Principal Plac | on of Rusinoon | Mailing Address | | | |
| Principal Place of Business Mailing Address ** EUGENE R. LOMANDO | | | | DO NOT WRITE IN THE 3. Date Incorporated or Qualified 02/17/1987 | S SPACE |
| 2. Principal F | Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | NOT APPLICABLE | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | Certificate of Status Desired | \$8.75 Additional Fee Regulred |
| City & Stat | te | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Ζiρ | Country | Zip | Country | 8. This corporation owes or has paid the c | urrent year Intangible |
| 24 | 25 | 29 3 | 10 | Personal Property Tax due June 30. | Yes No |
| | g. Name and Address of Curre | nt Registered Agent | | 10. Name and Address of New Registere | d Agent |
| LC | DMANDO, EUGENE R. | | 81 Name | | |
| 3778 S.W. 127TH AVE. | | | 62 Street Ad | Idress (P.O. Box Number is Not Acceptable) | |
| MI | IAMI FL 33175 | | | · · · · · · · · · · · · · · · · · · · | |
| l | | | 83 | | |
| | | | 84 City | | 85 Zip Code |
| dd Directord | to the proviolence of Continue CO7 Of | 00 and 607 1500 Florida Statistica | the share period of | F | |
| 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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | |
| agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | |
| SIGNATURE | Signature, typod or printed harne of registered ag | writ and title if applicable (NOTE: | Registered Agent elgnature rec | guired when reinstating) DATE | |
| 12. | | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECTORS IN 12 |
| TITLE | D | DELETE | 1.1 TITLE | | Change Addition |
| NAME | LOMANDO, EUGENE R. | | 1.2 NAME | | Ĭ |
| STREET ADDRESS | 3778 S.W. 127TH AVE | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | Į. | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME | ! | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | Total Care | 2. 4 CITY-ST-ZIP | | |
| TITLE | } | ☐ DELETE | 3.1 TITLE | | ☐ Change ☐ Addition i |
| NAME expert 40000000 |] | | 3.2 NAME | | |
| STREET ADORESS | | | 3.3 STREET ADDRESS | | 1 |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CITY-ST-ZIP | | Change Addition |
| NAME | | <u> </u> | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | i | | 4.4 CITY - ST - ZIP | | |
| TITLE | | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | Ì |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| City-St-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELFTE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | ļ |
| CITY-ST-ZIP | | 70 -1 - 10 | 6.4 CITY-ST-ZIP | 1 0 | |
| 14. I hereby | certify that the information supplied v | vith this filing does not quality or | the exemption stated | in Section 119.07(3)(i), Florida Statutes. I further | certify that the information |

4. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental annual report is true and accurate and that my signature stall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustles employed to execute this tender of the section of the corporation or the receiver or trustles employed to execute this tender of the section of the corporation or the receiver or trustles employed to execute this tender of the section of the corporation of the corporation of the section of th

SIGNATURE:

Tomando 1/19/28

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