

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J92024 (5)

1. Corporation Name

~~LA BELLA BEAUTY CLINIC INC.~~
LA BELLA INC.



Principal Place of Business

Mailing Address

% LYDIA MANDATO
400 W MERRITT AVE SUITE C
MERRITT ISLAND FL 32953-3434
US

% LYDIA MANDATO
400 E MERRITT AVE STE C
MERRITT ISLAND FL 32953-3434
US

3. Date Incorporated or Qualified
09/09/1987

3a. Date of Last Report
04/17/1995

2. Principal Place of Business

2a. Mailing Address

21 3505 N. Courtenay Parkway

26 3505 N. Courtenay Parkway

4. FEI Number
59-2861267

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

23 Merritt Island, FL

28 Merritt Island, FL

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

Zip Country
24 32953 25 Brevard

Zip Country
29 32953 30 Brevard

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MANDATO, LYDIA
400 E. MERRITT AVE
SUITE D
MERRITT ISLAND FL 32952

81 Name

Lydia Mandato
82 Street Address (P.O. Box Number is Not Acceptable)
3505 N. Courtenay Parkway

83

84

City
Merritt Island

FL

85 Zip Code
32953

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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Lydia Mandato

(NOTE: Registered Agent signing must do when reinstating)

DATE

4-10-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D MANDATO, LYDIA ☒ DELETE
NAME
STREET ADDRESS 300 RAQUETTE COURT
CITY-ST-ZIP MERRITT ISLAND FL

1.1 TITLE President/Secretary ☐ Change ☐ Addition
1.2 NAME Lydia Mandato
1.3 STREET ADDRESS 300 Raquette Court
1.4 CITY-ST-ZIP Merritt Island, FL 32952

TITLE D MANDATO, ANTHONY ☒ DELETE
NAME
STREET ADDRESS 300 RAQUETTE COURT
CITY-ST-ZIP MERRITT ISLAND FL

2.1 TITLE Vice President/Treasurer ☐ Change ☐ Addition
2.2 NAME Anthony Mandato
2.3 STREET ADDRESS 300 Raquette Court
2.4 CITY-ST-ZIP Merritt Island, FL 32952

TITLE D MANDATO, CARMELLO ☒ DELETE
NAME
STREET ADDRESS 300 RAQUETTE COURT
CITY-ST-ZIP MERRITT ISLAND FL

3.1 TITLE Vice President ☐ Change ☐ Addition
3.2 NAME Joseph D. Mandato
3.3 STREET ADDRESS 300 Raquette Court
3.4 CITY-ST-ZIP Merritt Island, FL 32952

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Vice President ☐ Change ☐ Addition
4.2 NAME Christopher D'Andrea
4.3 STREET ADDRESS 521 Sunset Lakes Drive
4.4 CITY-ST-ZIP Merritt Island, FL 32953

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Vice President ☐ Change ☐ Addition
5.2 NAME Carmello Mandato
5.3 STREET ADDRESS 521 Sunset Lakes Drive
5.4 CITY-ST-ZIP Merritt Island, FL 32953

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), 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:

Lydia Mandato

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-96

407453-1510

(31)

Daytime Phone #

CR2E034 (12/95)