2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 18, 2005 8:00 am Secretary of State

DOCUI 1. Entity Nam LA BELLA		ı			03	3-18-2005 90	054 035 '	***150.00)		
3505 N. COURTENAY PARKWAY 3				Mailing Address 3505 N. COURTENAY PARKWAY MERRITT ISLAND, FL 32953 U			1 18 B ir t 3 ii 11 11	#1 6	II BIBIA BIBIA BIBI	1 8:0 11 810 11 8:0 01	
2. Principal Place of Business 3. I			3. Mailing Address	Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			03112005	Chg-P	CR2E0	34 (10/03)	
City & State			City & State	City & State			4. FEI Number 59-28612	267	•		plied For t Applicable
Zip	Country		Zip	Count		5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	8. Name	and Address of Current	Registered Agent				7. Name and A	ddress of New F	Registered A	gent	
LYDIA MANDATO					Name						
3505 N. COURTENAY PARKWAY MERRITT ISLAND, FL 32953					Street Address (P.O. Box Number is Not Acceptable)						
				Ļ			ity E			Zip Code	
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State									FL oxide Jam f	amiliar with	and accord
	tions of registe		or the purpose of changing i	, egistort	00 011100 01	registor	od agoni, or boin,	in the state of the	Orida. 7 diff	anima witt,	wid decopt
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE											
FILE NOWII! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees											
10.	1 ==	OFFICERS AND		11.			ADDITIONS/C	HANGES TO OF	FICERS AND		
NAME STREET ADDRESS CITY-ST-ZIP	t .	D, LYDIA JETTE COURT ISLAND, FL	☐ Delete	1						Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	300 RAQL	D, ANTHONY JETTE COURT ISLAND, FL	🖺 Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	300 RAQU	D, JOSEPH D. JETTE COURT	Delete	· · · · · ·			lato, Jose Biscayne		erritt	Change Island	Addition FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MANDATO 521 SUNS	D, CARMELLA SET LAKES DRIVE ISLAND, FL	☐ Delete	TITLE NAM STRE		521	ato, Carn Sunset La itt Islan	akes Driv	e	Change	2953 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete				-			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	- CITY	ET ADDRESS -ST-ZIP		•		,	Change	Addition
12: (hereby	certify that the	intermation supplied with	h this filing does not qualify to s true and accurate and that	or the exe	mption sta	ted in Se	ction 119.07(3)(i),	Florida Statutes.	I further cert	lify that the in	nformation

12: I hereby 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 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: SAMMURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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