

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra S. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **P94000050382 (8)**

1. Corporation Name  
**BELMAT, INC.**

MAY - 1 11:10:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**124 ELYSIUM DRIVE ROYAL PALM BEACH FL 33411**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **07/06/1994** 3a. Date of Last Report  
4. FE Number **Not in Business Yet** Applied For  Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
7. This corporation has liability for changing fees under S. 199.092, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip County 28 Zip County  
24 25 29 30

9. Name and Address of Current Registered Agent  
**WITKOWSKI, RONALD  
12788 WEST FOREST HILL BLVD.  
SUITE 2003  
WEST PALM BEACH FL 33414**

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City **FL** B5 Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and firm if applicable. (607) Registered Agent signature required when amending.

12. OFFICERS AND DIRECTORS	
TITLE	<b>DP</b>
NAME	<b>DIAZ, MATEO J</b>
STREET ADDRESS	<b>124 ELYSIUM DRIVE</b>
CITY- ST- ZIP	<b>ROYAL PALM BEACH FL 33411</b>
TITLE	<b>DST</b>
NAME	<b>DIAZ, BELKYS</b>
STREET ADDRESS	<b>124 ELYSIUM DRIVE</b>
CITY- ST- ZIP	<b>ROYAL PALM BEACH FL 33411</b>
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY- ST- ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY- ST- ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY- ST- ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY- ST- ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. 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 110.07(3)(k), 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: Mateo Diaz President 3/23/95 (1104) 7932264  
SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR