

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.  
AMOUNT DUE ON OR BEFORE 6/30/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED  
95 JUL 21 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P94000081312 (8)

1. Corporation Name  
**BELL AMERICAN CORPORATION**

Principal Place of Business Mailing Address  
11522 NW 20TH CT. 11522 NW 20TH CT.  
CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071

DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualified <b>11/03/1994</b>		3a. Date of Last Report <b>N/A</b>	
21. Principal Place of Business <b>3122 N.W. 114<sup>th</sup> Ave</b>		26. Mailing Address <b>3122 N.W. 114<sup>th</sup> Ave</b>	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.	
23. City & State <b>Coral Springs, FL.</b>		28. City & State <b>Coral Springs, FL.</b>	
24. Zip <b>33065</b>		29. Zip <b>33065</b>	
25. County <b>Stoward</b>		30. County <b>Stoward</b>	

4. FEI Number	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under c. 100.022, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**BELL, RANDALL B  
11522 NW 20TH CT.  
CORAL SPRINGS FL 33071**

10. Name and Address of New Registered Agent  
81 Name **Bell, Randall B.**  
82 Street Address (P.O. Box Number is Not Applicable)  
**3122 N.W. 114<sup>th</sup> Ave**  
83  
84 City **Coral Springs** FL 85 Zip Code **33065**

11. Pursuant to the provisions of Sections 607.0503, 607.0504, 607.0505, 607.0506, 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, Sections 607.0503, Florida Statutes.

SIGNATURE *[Signature]* DATE **7/14/95**

12. OFFICERS AND DIRECTORS	
TITLE	DPT
NAME	BELL, RANDALL B
STREET ADDRESS	11522 NW 20TH CT.
CITY, ST, ZIP	CORAL SPRINGS FL 33071
TITLE	DPS
NAME	BELL, LYNETTE M
STREET ADDRESS	11522 NW 20TH CT.
CITY, ST, ZIP	CORAL SPRINGS FL 33071
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ALL OTHERS (PARTIAL LISTING OF THE ABOVE LISTED OFFICERS)	
11 TITLE	DPT
12 NAME	Bell, Randall B
13 STREET ADDRESS	3122 N.W. 114 <sup>th</sup> Ave
14 CITY, ST, ZIP	CORAL SPRINGS, FL 33065
21 TITLE	DVS
22 NAME	Bell, Lynette M.
23 STREET ADDRESS	3122 N.W. 114 <sup>th</sup> Ave
24 CITY, ST, ZIP	CORAL SPRINGS, FL 33065
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 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)(b), Florida Statutes. I further certify that the information indicated in this 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 at the time of or before the filing of this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 (as required) or on an addendum with an address.

SIGNATURE: *[Signature]* **Randall B. Bell** DATE **7/14/95** 305  
344-1936

CR2E034 (3/95)