## 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 # P96000018315 (7)

GELATERIA BELLA CORP.

Principal Place of Business Mailing Address						that think tital tind! Alli iBbi
			GTON AVENUE			
MINMI DENO	IL LE SOLOS	MINMI DENOTI FL 33133	MIAMI BEACH FL 33139		DO NOT WRITE IN THIS SPACE	
}					3. Date Incorporated or Qualified	
A Discount	DO TE EL DESCRIPTION DE LA CONTRACTION DEL CONTRACTION DE LA CONTR				02/28/1996	
2. Principal Place of Business		26. Mailing Address	2a. Mailing Address		4. FEI Number 65 - 06 4 39 7 2	Applied For
Suite, Apt. #, etc.		Suite, Apt #, etc.				Not Applicable \$8.75 Additional
22		hi-n	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	. ,	·	Trust Fund Contribution	Added to Fees
Ζίρ			Coun	try	8. This corporation owes or has paid the o	
25 29 29 29 Q, Name and Address of Current Registered Ager			30		Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
				B1 Name		
AMERILAWYER CHARTERED 343 ALMERIA AVENUE				20 00004 000	(DO D. A	
	ORAL GABLES FL 33134		'	Street Add	iress (P.O. Box Number is Not Acceptable)	
, ,	DING COLLO I C COTO		Ţī	93		
			ŀ	34 City	-	85 Zip Code
					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 reg 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 regis						
agent.	am familiar with, and accept the	obligations of, Section 607.0505, F	lorida Statu	tes.	and the board of directions. Thereby decopy the s	ppowittions do registros
SIGNATURE	<del></del>	i datamat kalakatan merentakan erretaka	07.6		uired when reinstating) DATE	
12.	Signature, typed or printed name of regis  OFFICE	RS AND DIRECTORS	13.	Agent signature redu	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSTD	DELETE	1.1 TITL	É		Change Addition
NAME	ESPEJO, ENRIQUE		1.2 NAM	1E		Į.
STREET ADDRESS 1434 WASHINGTON AVENUE			1.3 STREET ADDRESS			
CITY-ST-ZIP MIAMI BEACH FL 33139			1.4 CITY-ST-ZIP			- <u></u>
TITLE		DELETE	2.1 TOTA	}		Change Addition (
NAME			2.2 NAN			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP	<del>                                     </del>	DELETE	3.1 TiTL	Y-ST-ZIP		☐ Change ☐ Addition
NAME			3.2 NAN	Ì		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP			3.4. CiT	Y-S1-ZIP		
TITLE		DELETE	4.1 THE	E		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP		Therese		'-ST-ZIP		Ohanes - suite
TITLE		DELETE	5.1 1171			Change Addition
NAME CONTEX ADDRESS			5.2 NAN			
STREET ADDRESS				EET ADDRESS '-ST-ZIP		
CITY-ST-ZIP	<u> </u>	DELETE	6.1 TiTe			Change Addition
NAME			62 NAM			
STREET ADDRESS	;		1	EET ADDRESS		Ì
COTY-ST-74P				- ST - 71P		

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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:

Engue Espiro

4/30/9

305-534-0056

**FILED** 

May 11 1998 8:00am

Secretary of State