2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 19, 2006 08:00 AM **DOCUMENT # 494925** Secretary of State 1. Entity Name BELGO INTERNATIONAL OF FLORIDA, INC. Principal Place of Business Mailing Address 2231 NE 192ND STREET **2231 NE 192ND STREET** N. MIAMI BEACH, FL 33180 N. MIAMI BEACH, FL 33180 No Chg-P 03292006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1757327 Not Applicate \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOVAERT, GUL L P DO NOT WRITE **2231 NE 192ND STREET** N. MIAMI BEACH, FL 33180 IN THIS SPACE 5. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little 7 applicable. (NOTE, Registered Agent signature required when reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GOVAERT, GUI L NAME U00000519820 2231 N.E. 192ND STREET STREET ADDRESS CITY-ST-ZIP N. MIAMI BCH, FL .05/02/06-80067-021 150.0**0** TITLE GOVAERT, ALICE NAME STREET ADDRESS **2231 NE 192ND STREET** CITY-ST-ZIP N MIAMI BCH, FL NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/15/06

FILED

305. 924-8981