FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 647150

(2)

BEAMONT INTERNATIONAL LTD., COMPANY.

Discord Discord Out of											
Principal Place of Business Mailing Address 2546 COUNTRY GOLF DRIVE 2546 COUNTRY GOLF DRIVE					RIVE						
WELLINGTON FL 33414 US				WELLINGTON FL 33414-8322 US							
								3. Date Incorporated or Qualified 3a. Date of Last Report 12/05/1979 05/01/1996			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For	_		
21 Suite, Apl. #, etc.			26	26				59-2040496 Not Applicat	ole		
22				Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fae Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	Ì		
Z⊦p	T	Country		Zip	Co	untry		8. This corporation has liability for intangible tax under s. 199.032,	コ		
24	25			29 30				Florida Statutes 🔲 Yes 📜 No			
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
SOE	BEL, MONRO	E				81	Name				
2546 COUNTRY GOLF DRIVE WELLINGTON FL 33414						82	Street A	Address (P.O. Box Number is Not Acceptable)	\dashv		
WEL	LINGIUN F	L 33414				83					
i						84	City	85 Zip Code	-		
		10		02 4500 Et O. 1				FL ⁶⁵ Zip code			
11. Pursuant i office or re agent. I a	to the provision registered age im familiar with	ons of Sections 607.05 int, or both, in the Sta n, and accept the obli	502 and to te of Flori igations o	607.1508, Florida Stati da. Such change was f, Section 607.0505, F	utes, the a authoriza Iorida Sta	above ed by atutes	the corp the	d corporation submits this statement for the purpose of changing its registere rporation's board of directors. I hereby accept the appointment as registered	r De		
SIGNATURE									_		
	Signature typed o	printed name of registored a	·				nt signature f	e required when reinstating) DATE			
12.	P	OFFICERS A	ND DIRE	DELETE	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	•	CATDICE				TITLE		T cisula C violi	ן ווטי		
NAME SOBEL, BEATRICE 2546 COUNTRY GOLF DR				1		NAME					
STREET ADDRESS	WELLING						ADDRESS				
CHTY-ST-7IP TITLE	S	IONTL		DELETE		CITY - S TITLE	r-ZIP	Change Addit	inn		
NAME	SOBEL, M	IUNDUE		Deterie		NAME			""		
'		INTRY GOLF DR					ADDDESS				
STREET ADDRESS	WELLING				- 1		ADDRESS		- }		
CHY-ST-ZIP TITLE	WELLING	1011 L		DELETE		CITY-S	DI-TIP	Change Addit	ion		
NAME				<u> </u>	1	NAME					
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CiTY - ST - ZIP						CITY-!			ĺ		
TITLE				☐ DELETE		TITLE		☐ Change ☐ Addit	ion		
NAME					4.2	NAME					
STREET ADDRESS					4.3	STREET	ADDRESS		1		
CHTY-ST-ZIP						CITY-S					
TITLE				DELETE		TITLE		☐ Change ☐ Addil	ion		
NAME					5.2	NAME	j		1		
STREET ADDRESS					5.3	STREET	ADDRESS				
CITY-ST-ZIP					5.4	CITY - S	1 - ZiP				
TITLE				☐ DELETE	6.1	TITLE		☐ Change ☐ Addit	ion		
NAME					6.2	NAME	1				
STREET ADDRESS					6.3	STREET	ADORESS				

14. I do 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 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