

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Mar 30, 2000 08:00 AM**  
**Secretary of State****DOCUMENT # F54605****1. Entity Name**  
BELESE INVESTMENTS, INC.**Principal Place of Business**ONE S.E. THIRD AVE.  
SUITE 2130  
MIAMI  
33131

FL

**Mailing Address**ONE S.E. THIRD AVE.  
SUITE 2130  
MIAMI  
33131

FL

**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

**4. FEI Number****59-2187653**

Applied For

Not Applicable

**5. Certificate of Status Desired**☐**\$8.75** Additional  
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**COPROLITE CORPORATION  
ONE SE THIRD AVE.  
SUITE 2130  
MIAMI  
33131

FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**8. 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.****SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**03/30/2000**

DATE

**9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.**  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State****10. Election Campaign Financing  
Trust Fund Contribution.** ☐**\$5.00** May Be  
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	S	<input type="checkbox"/> Delete
NAME	BLASS STEPHEN A	
STREET ADDRESS	1 SE 3RD AVE., SUITE 2130	
CITY-ST-ZIP	MIAMI FL 33131	

TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLASS STEPHEN A	
STREET ADDRESS	1 SE 3RD AVE., SUITE 2130	
CITY-ST-ZIP	MIAMI FL 33131	

TITLE	VAS	<input type="checkbox"/> Delete
NAME	FRANKEL MELVIN F	
STREET ADDRESS	ONE SOUTHEAST THIRD AVE., SUITE 2130	
CITY-ST-ZIP	MIAMI FL 33131	

TITLE	VAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANKEL MELVIN F	
STREET ADDRESS	ONE SOUTHEAST THIRD AVE., SUITE 2130	
CITY-ST-ZIP	MIAMI FL 33131	

TITLE	PD	<input type="checkbox"/> Delete
NAME	PANTIZ SHIRLEY	
STREET ADDRESS	200 WINSTON DRIVE #1514	
CITY-ST-ZIP	CLIFFSIDE PARK NJ	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.****SIGNATURE** STEPHEN A. BLASS

03/30/2000