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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400000438 (1) BELT-A-LA CART, INC.					4 100 HR 0 1516 1616 010 H 0010 65151 001	IL BOITH BOLLE SI	Biki <b>11001</b> fold	i (Rei 1961
Principal Place of Business Mailing Address								
BOCA RATON TOWN CENTER BOCA RATON FL 07410		32-16 BROADWAY FAIR LAWN NJ 07410-4600						
					3. Date Incorporated or Qualified	- 1	e of Last R	
2. Principal Pla	ce of Business	2a. Mailing Address			4.01/28/1994	<del>05/</del> 0	1/1996 Ap	onlind Eng
11	,	26					- 1AI	ot Applicable
Sulte, Apt. #,	, etc.	Suite, Apt. #, etc.			<b>22-3255355 5.</b> Certificate of Status Desired		\$8.75	<u></u>
22		27			6. Certificate of Status Desired	LJ	Fee Re	quired
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip <b>29</b>	Country 30	,	This corporation has liability for Florida Statutes	intangible t Yes		. 199.032,
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Re	gistered A	gent	
GOODMAN, RONALD				Namo				
	A SEVERN DRIVE		82	2 Street Address (P.O. Box Number is Not Acceptable)				
	RATON FL 33433		83					
			63					
			84	City		FL	<b>85</b> Zip (	Code
SIGNATURE _	gistered agent, or both, in the State of familiar with, and accept the obligation of the state of registered agent of the state of the	t and title if applicable (NOT			poration submits this statement for the tion's board of directors. I hereby account and when renstating)  ADDITIONS/CHANGES TO OFFI	DATE		·
TITLE	P	PELETE 1.11					Change	Addition
ALABATC .	GOODMAN, FREDA		1.2 NAME					
	8135-A SEVERN DRIVE		1.3 STREET	ADDRESS	•			
CITY-ST-ZIP	BOCA PATON FL	A RATON FL		ST - ZIP			CT 20.	
THE STATE	ST 13	DETELE	2.111116	}		l	L Change	Addition
	GOODMAN, LAWRENCE B		2.2 NAME : 2.3 STREE	ADDOCCO				
	32-16 BROADWAY			S1-ZIP				
TITLE	FAIR LAWN NJ	DELETE	3.1 TITLE	22.511			Change	Addition
NAME	Z1		3.2 NAME	]			-	
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP	<del></del>		3,4. CITY-	S1 - ZIP				
TITLE		DELETE	4.1 TITLE	1		ļ	Change	
NAME			4. 2 NAME	- 1				
STREET ADORESS				1 ADDRESS				
City-ST-ZIP TITLE		DELETE 5.17		ST-ZIP			Change	Addition
NAME	,		5.2 NAME	1		'	c.ange	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			5.4 CITY- :					
TITLE		DELETE	6.1 1171.6				Change	☐ Addition
NAME			6.2 NAME	[				
STREET ADDRESS	· ·		6.3 STREE	I ADDRESS				
CITY-ST-ZIP	andly that the information a section	with this disposition and are "	6.4 CITY-1		ed in Section 119 07/3)(i). Florida Statut	12	mantid sets a	Al

I do never determine morroacon supplied with this timing does not quality for the exemption stated in Section 119.07(3)(), 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 empower if to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if manged, or og an attachment with an address.

**FILED** 

May 09 1997 8:00am

Secretary of State