

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000000987 (7)

1. Corporation Name

BELMONT CONSTRUCTORS, INC.

Principal Place of Business

2400 WEST LOOP SOUTH, STE. 550  
HOUSTON TX 77027

Mailing Address

2400 WEST LOOP SOUTH, STE. 550  
HOUSTON TX 77027



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

3. Date Incorporated or Qualified  
02/28/1994

3a. Date of Last Report  
04/11/1995

4. FEI Number

22-2365305

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

□

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 registered 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 registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent, if not applicable

(NOTE: Registered Agent signature is required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE C  
NAME WILSON, RICHARD O  
STREET ADDRESS 2400 WEST LOOP SOUTH, STE. 550  
CITY-STATE-ZIP HOUSTON TX 77027

☐ DELETE

TITLE D  
NAME WALLACE, JOHN C  
STREET ADDRESS 65 VINCENT SQUARE  
CITY-STATE-ZIP LONDON SW1P 2RX ENGLAND

☐ DELETE

TITLE D  
NAME DAVIDSON, JAMES B  
STREET ADDRESS AV. DE LA GARE 10  
CITY-STATE-ZIP CH-1003 LAUSANNE, SWITZERLAND

☐ DELETE

TITLE P  
NAME WARNER, RANDOLPH W  
STREET ADDRESS 2400 WEST LOOP SOUTH, STE. 550  
CITY-STATE-ZIP HOUSTON TX 77027

☐ DELETE

TITLE VST  
NAME WEATHERLY, B.F.  
STREET ADDRESS 2400 WEST LOOP SOUTH, STE. 550  
CITY-STATE-ZIP HOUSTON TX 77027

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/96

Date

713/621-3223

Daytime Phone #

CR2E034 (12/95)