

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Mar 21, 2005 08:00 AM  
Secretary of State

DOCUMENT # F99000001190

1. Entity Name

BELLA IDEA, INC.



Principal Place of Business  
3236 PROSPECT ST. N.W.  
WASHINGTON DC 20007

Mailing Address  
3236 PROSPECT ST. N.W.  
WASHINGTON DC 20007

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2089424

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

NATIONAL REGISTERED AGENTS INC.  
526 E. PARK AVE.  
TALLAHASSEE FL 32301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME KARABASSIS, IRAKLIS  
STREET ADDRESS 3236 PROSPECT STREET NORTHWEST  
CITY-ST-ZIP WASHINGTON DC 20007

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DV ☐ Delete  
NAME LECKER, JOHN  
STREET ADDRESS 110 CODNER'S FERRY  
CITY-ST-ZIP CHARLESTON SC 29492

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME KARABASSIS, JASMINE  
STREET ADDRESS 3236 PROSPECT ST. N.W.  
CITY-ST-ZIP WASHINGTON DC 20007

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Delete  
NAME COOPER-LECKER, LORI A  
STREET ADDRESS 110 CODNER'S FERRY  
CITY-ST-ZIP CHARLESTON SC 20007

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME KARABASSIS, CHRISTOS  
STREET ADDRESS 3236 PROSPECT ST. N.W.  
CITY-ST-ZIP WASHINGTON DC 20007

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Iraklis Karabassis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

202 338 0725

Daytime Phone #