

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # F99000005384

1. Entity Name
BEL-ALTA PROPERTIES, INC.



Principal Place of Business
9665 WILSHIRE BLVD., SUITE M-10
BEVERLY HILLS, CA 90212

Mailing Address
1420 540-5 AVE. S.W.
CALGARY ALBERTA T2P 0M2
CANADA, XX



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
95-4373588

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, BRYAN A
933 LEE RD
STE 400
ORLANDO, FL 32810

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00

9. ☐ **\$5.00 May Be
Added to Fees**

U00000874912
04/11/08-80011-016 150.00

10. OFFICERS AND DIRECTORS

TITLE PCD
NAME BELZBERG, HYMAN
STREET ADDRESS 5TH AVENUE, S.W., SUITE 1420
CITY-ST-ZIP CALGARY, ALBERTA, CANADA,

TITLE ST
NAME BELZBERG, HYMAN
STREET ADDRESS 5TH AVENUE, S.W., SUITE 1420
CITY-ST-ZIP CALGARY, ALBERTA, CANADA,

TITLE V
NAME BELZBERG, WILLIAM
STREET ADDRESS 9665 WILSHIRE BLVD., SUITE M-10
CITY-ST-ZIP BEVERLY HILLS, CA 90212

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 13, 2008

Date

Daytime Phone #