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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

BELMAR REAL ESTATE DEVELOPMENT, INC.

FILED May 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				{	ist Belder de Bre misser mente disper in de	
% MARIO BR	•	IARIO BRAMNICK, ESQUIRE				
9050 PINES BLVD., # 450		9050 PINES BLVD # 450				
PEMBROKE PINES FL 33024			PEMBROKE PINES FL 33024		DO NOT WRITE IN 1	THIS SPACE
US		U\$			3. Date Incorporated or Qualified	
					12/03/1984	
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0022167	Not Applicable
Suite, Apt. #, etc		h n	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & State		Crt. 6 Ctate	27 City & State		<u> </u>	
City & State	3	}-¬ ′			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	Country	7ip	Cour	ntrv	11401.10.10.0011.1041011	
	25	29	30	iti y	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
24	9. Name and Address of Curren		301		10. Name and Address of New Registe	
RO	AMNICK, MARIO			81 Name		
	50 PINES BLVD.					
STE. #450				82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
PEMBROKE PINES FL 33024			}	63		
, ,,	MIDNORE FINES I E 33024					
				84 City		FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.050	2 and 607 1508. Florida State	utes the at	I	poration submits this statement for the nume	ose of changing its registered
office or re	egistered agent, or both, in the State.	of Florida, Such change was	 authorized 	by the corporat	tion's board of directors. I hereby accept the	e appointment as registered
agent. La	m familiar with, and accept the obliga	itions of, Section 607.0505, F	londa Stati	ites.		
SIGNATURE	Signature, typed or printed name of registered age:	of and other depends the CNC	Mi Barretarn	Agent signature requir	ned when reinstalings	ATE
12.	OFFICERS AND		13.	Tigott signature redon	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PDT	☐ DELETE	1.1 717	LE		☐ Change ☐ Addition
NAME	BRAMNICK, ZACK		1.2 NA	ME		-
STREET ADORESS	9050 PINES BLVD. #450		1.3 ST	REET ADORESS		
CITY-ST-ZIP	PEMBROKE PINES FL 33024			Y-ST-ZIP		
TIBLE	SVD	DELETE	2.1 717			Change Addition
NAME	BRAMNICK, MARIO		2.2 NA	ME		
STREET ADDRESS	9050 PINES BLVD. #450		2351	REET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL 33024			TY-ST-ZIP		
TITLE		DELETE	3.1 TH			☐ Change ☐ Addition
NAME			3.2 NA	ME		
STREET ADORESS			3.3 ST	REET ADDRESS		ţ
CITY-ST-ZIP				TY-ST-ZIP		-
TITLE		DELETE	4.1 101			Change Addition
NAME			4.2 N/	l l		
STREET ADDRESS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	5.1 10			Change Addition
NAME			5 2 NA	1 .		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				IY-SI-ZIP		į
TITLE	<u> </u>	DELETL	6.1 TH			Change Addition
NAME			6.2 NA)		
STREET ADDRESS				REET ADDRESS		
				IY-\$T-ZIP		
CITY-ST-ZIP			■ 04 U1	1-31-51		

14. I horeby 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 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.