


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**May 03, 2005 08:00 AM
Secretary of State**

DOCUMENT # K42584 1. Entity Name SHE'S A BELLE, INC.	
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Principal Place of Business 4600 124TH ST WEST CORTEZ, FL 34215	Mailing Address PO BOX 249 CORTEZ, FL 34215 US
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04252005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0084345	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BELL, DOUGLAS 8708 50TH AVE.W. BRADENTON, FL 34210

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BELL, WALTER T. 12115 45TH AVE W. CORTEZ, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BELL, DOUGLAS C. 8708 50TH AVE W. BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BELL, CALVIN E. 12115 45TH AVE W. CORTEZ, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/05/05-80076-001 1950.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Walter T. Bell</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	MAR 29 2005 941 794 1249 <small>Date Daytime Phone #</small>

APR 29 2005