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

D MA A

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

L36818

(7)

BELLA ITALIA, INC.

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State



1266 8. 3RD STREET JACKSONVILLE BEACH FL 32250		1266 S. 3RD STREET JACKSONVILLE BEACH FL 32250					
,					DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualified 12/18/1989		
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	I An	plied For
	45 MERRILL RD.		= RRiL	LRD	59-2992146	- + -	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>		5. Certificate of Status Desired	69.75	
22 JACK.	SONVILLÉ, FL.	27			6. Certificate of Status Desired	Fee Re	quired
City & State 32277		City & State 28 JACKSONVILLE, FL		6. Election Campaign Financing	\$5.00 May Be Added to Fees		
23 322 Zip	Country	28 JACKSONVIL	Country		Trust Fund Contribution L		
24	25]	32277 3			 This corporation owes or has paid to Personal Property Tax due June 30. 		angibie No (
5-7	9. Name and Address of Current		<u> </u>		10. Name and Address of New Regist		
DII	BELLA, ANGELA		81	Name			
13138 N ANNANDALE DR.			82	82 Street Address (P.O. Box Number is Not Acceptable)			
	CKSONVILLE FL 32225			,			
			83				
			84	City	. * <u>*</u> .	FL 85 Zip (Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the above	-named corp	oration submits this statement for the purp		s reaistered
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 appliant with, and accept the obligations of Section 607.0505, Florida Statutes.							
	ampole R.M.D. B	elle virresident	Ja Statutes		ΩΟ	RIL 15,1	902
SIGNATURE 1	Signature typed or printed flame of registered agent	and title if applicable (NO1E: R	Registered Age	nt signature require	ed when reinstating) (DATE	110
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition
NAME	DIBELLA, ANTONINO		1.2 NAME				
STREET ADDRESS	13138 N ANNANDALE DR.		1,3 STREET	ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL	DELETE	1.4 CITY - S1	T-ZIP		Channe	T I feddion
TITLE	DIBELLA, ANGELA	D DECEIE	2.1 TITLE			Change	L Addition
NAME STREET ADDRESS	13138 N ANNANDALE DR.		2.2 NAME 2.3 STREET	*DDDECC			
CITY-ST-ZIP	JACKSONVILLE FL		2.4 CITY-S				
TITLE	- CACAGOTTALLE TE	DELETE	3.1 TITLE	11-ZIP		☐ Change	☐ Addition
NAME			3.2 NAME				_
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	1			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME	1			
STREET ADDRESS			4.3 STREET	ADDRESS			-
CITY-ST-ZIP		——————————————————————————————————————	4.4 CITY-ST	r-21P		——————————————————————————————————————	THE CO.
TITLE		☐ DELETE	5.1 TITLE			L Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP		☐ DELETE	5.4 CITY-\$1	1 - ZIP		Change	Addition
TITLE		C) DECEIE	6.1 TITLE			Change	
NAME STREET ADDRESS			6.2 NAME 6.3 STREET	ADDRESS			
STREET ADDRESS	>		6.4 CITY-S1				
14. I hereby o	ertify that the information supplied with	n this filing does not qualify for t			Section 119.07(3)(i), Florida Statutes. I furt	her certify that the	information
indicatéd :	on this annual report or supplemental	annual report is true and accura	ate and tha	at my signatur	re shall have the same legal effect as if ma	ide under oath; tha	atlam 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.							