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

Mailing Address 7001-45 MERRILL RD

JACKSONVILLE FL 32277

2a. Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90004 036 ***150.00

DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

12/18/1989 4. FEI Number

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L36818 1. Corporation Name

BELLA ITALIA, INC.

Principal Place of Business

2. Principal Place of Business

7001-45 MERRILL RD

JACKSONVILLE FL 32277

1		26				59-2992146	No	ot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75		ļ	
2		27				5. Certificate of Status Desired	Fee Re	equired	1	
City & State City & State						6. Election Campaign Financing	•	May Be	.	
28						Trust:Fund:Contribution	Added	to Fees	Ĵ÷	
Zip	Country Zip			Country		8. This corporation owes the current year in		~~.	ļ	
30				·L		Personal Property Tax.				
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered	Agent		ł	
DIBELLA, ANGELA 13138 N ANNANDALE DR. JACKSONVILLE FL 32225				"	Traille					
				82 Street Add		ddress (P.O. Box Number is Not Acceptable)				
				100					1	
WINDLE I E DELED			83							
				84	City	FI	85 Zip (Code		
					L <u>.</u>	FLFL			ł	
office or re agent. I as SIGNATURE	egistered agent, or both, in the State on the state of the colligation of the colline of th	of Florida. Such char ions of, Section 607	nge was autho .0505, Florida	orized by Statutes	the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	intment as re	gistered		
					t signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	7PS IN 12	1 8	
12.	P OFFICERS ANI	AND DIRECTORS DELETE		13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	;	
TITLE	·	- DECE 12		1.2 NAME						
NAME	ACTOR AN AND AND AND AND AND			1.3 STREET ADDRESS		·			3	
STREET ADDRESS	LACKCOARDILE EL			1.4 CITY-ST-ZIP					}	
CITY-ST-ZIP	V	DELETE			1-212		Change	Addition	6	
TITLE	*								Ì	
NAME	DIBELLA, ANGELA 13138 N ANNANDALE DR.			2.2 NAME 2.3 STREE	LADODESE				l	
STREET ADDRESS	JACKSONVILLE FL			2.3 STREE			-			
CITY-ST-ZIP TITLE	JACKSONVILLE FL			3.1 TITLE	51-ZIF		Change	Addition	1	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3.2 NAME	ļ			_		
STREET ADDRESS				3.3 STREE	ADORESS				_	
				3.4. CITY-S						
CITY-ST-ZIP			DELETE	4.1 TITLE	1-21		Change	Addition	1	
NAME				4.2 NAME	ļ					
STREET ADDRESS					TADORESS					
CITY-ST-ZIP				4.4 CITY-S						
TITLE			DELETE	5.1 TITLE			☐ Change	☐ Addition	1	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREE	TADDRESS	•				
CITY+ST-ZIP				5.4 CITY-S	T-ZIP					
TITLE			DELETE	6.1 TITLE			Change	☐ Addition		
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREE	T ADDRESS					
CITY-ST-ZIP			•	6.4 CITY-S	T-ZIP					
14. I hereby c	ertify that the information supplied wit	h this filing does not	qualify for the	exempt	on stated in	Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the i	information	•	
indicated officer or a	on this annual report or supplemental	annual report is true ver or trustee empov	e and accurate wered to exec	and that ute this r	t my signati eport as rec	ure shall have the same legal effect as if made unc quired by Chapter 607, Florida Statutes; and that r	ier oatn; that	ı am an		