2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L42789

1. Entity Name
BELLO AUTO GLASS COMPANY

Principal Place of Business	Mailing Address
310 NW 136 AVE. MIAMI, FL 33182	310 NW 136 AVE. MIAMI, FL 33182

DO NOT WRITE IN THIS SPACE

01202006   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
65-0173971		Not Applicable

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

6. Name and Address of Current Registered Agent

LOPEZ, ALEJANDRO A
310 NW 136 AVENUE
MIAMI, FL 33182

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, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

000000501809
04/25/06-80079-012 150.00

10.	OFFICERS AND DIRECTORS	
TITLE	PTD	
NAME	LOPEZ, ALEJANDRO A	
STREET ADDRESS	310 NW 136TH AVE	
CITY-ST-ZIP	MIAMI, FL	
TITLE	SD	
NAME	LOPEZ, MARTA	
STREET ADDRESS	310 NW 136TH AVE	
CITY-ST-ZIP	MIAMI, FL	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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: _Alejandro Lopez_   04/06/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #