## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

## Mar 21, 2005 08:00 AM **Secretary of State** DOCUMENT # M03000001794 1. Entity Name BELLEZZA REALTY, LLC Mailing Address Principal Place of Business \_\_\_ ONE CANAL PLAZA ONE CANAL PLAZA PORTLAND, ME 04101 PORTLAND, ME 04101 CR2E083 (10/03) 01282005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GRABINSKI, MATTHEW L ESQ. DO NOT WRITE 4001 TAMIAMI TRAIL NORTH #300 NAPLES, FL 34103 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE BOULOS, JOSEPH F NAME STREET ADDRESS ONE CANAL PLAZA CITY-ST-ZIP PORTLAND, ME 04101 000000271450 03/21/05-60048-006 50.00 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIT! F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or thustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**FILED** 

Daytime Phone #