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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M50195

(0)

BELLFLOWER INVESTMENT COMPANY

Principal Place of Business C/O MARCOS A. GUERRA 3663 SW 6TH ST., SUITE 210 MIAMI FL 33135		Mailing Address C/O MARCOS A. GUERRA 3663 SW 8TH ST SUITE 210 MIAMI FL 33135-4133							
						3. Date Incorporated or Qualified 04/13/1987	3a, Da 02/0	ate of Last Re 01/1996	port
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0120027	Applied For Not Applicable			
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	· •			Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zip 4	Country 25	Z(p 29	30 Cou	ntry			Yes [] No	199.032,
	9. Name and Address of Current	Registered Agent		61	Name	10. Name and Address of New Re	patered .	Agent	
3663	RRA, MARCOS A. B SW 8TH ST. T 040			82		ress (P.O. Box Number is Not Acceptab	le)	e /18///	
-	E 210 Al FL 33135			83					
				84	City		FL	85 Zip C	Code
office or ri agent. I ai SIGNATURE.	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida, Such change was a tions of, Section 607,0505, Fk	authorized orida Stat	i by utes	the corpora s.	poration submits this statement for the p tion's board of directors. I hereby accep ared when reinstating)	DATE	ointment as i	registered
12.	OFFICERS AND		13.		····	ADDITIONS/CHANGES TO OFFIC	ERS AND		
name Street address	DP FARAJ, FELIPE J. 11750 SW 18TH ST. #428 MIAMI FL	☐ DELETE		ime Reet	ADDRESS			L Change	Addition
CITY - ST - ZIP			1.4 CI		IT-ZIP			Change	Addition
NAME STREET ADDRESS	FARAJ, SOAD R. 11750 SW 18TH ST. #428 MIAMI FL	□ DELETE		ime Reet	ADDRESS			-1 cuanga	L.J AUGIRION
CITY-S1-ZIP TITLE	DST	DELETE	31 TR		ST-ZIP			Change	Addition
NAME STREET ADDRESS	FARAJ, JESUS ALFONSO 11750 SW 18TH ST. #428 MIAMI FL	band Percei	3.2 NA 3.3 ST	ime Reet	ADDRESS				
CITY-ST-ZIP TITLE	AS	DELETE	3.4. CI		ST-ZIP	······································		Change	☐ Addition
NAME STREET ADDRESS (CITY-ST-ZIP	FREED, OWEN S. 150 W FLAGLER ST, #2200 MIAM! FL	, been	4. 2 N	ame Reet	ADDRESS			☐ Grange	Addition
TITLE		☐ DELETE	5.1 10					Change	Addition
NAME STREET ADDRESS CITY - ST - ZIP			5.2 NA	ME REET	ADDRESS			-	
TITLE		DELETE	6.1 71					Change	☐ Addition

6.2 NAME

6.3 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or spoplemental annual 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 of the receiver or fustee 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.

Daylime Phone #

FILED

Feb 14 1997 8:00am

Secretary of State