


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000077612	
1. Entity Name BELLA FLOR, INC.	

Principal Place of Business 2210 SW 89 PL MIAMI, FL 33165	Mailing Address 2210 SW 89 PL MIAMI, FL 33165
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DO NOT WRITE IN THIS SPACE



07192004 No Chg-P CR2E034 (10/03)

4. FCI Number 65-1036243	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BROWN, ESTEBAN 9700 S DIXIE HEY, STE 900 MIAMI, FL 33156	DO NOT WRITE IN THIS SPACE
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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 of person should have of registered agent and the paper and **DATE** _____ (NOTE: Registered Agent signature required when changing)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	D BROWN, ROSA A 2210 SW 89 PL MIAMI, FL 33165
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: Rosa Brown **DATE:** Aug 18, 2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Deputy Secretary