

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90096 018 ***150.00

DOCUMENT # P02000031696

1. Entity Name
BELLJOHAWK, CORP.



Principal Place of Business
**15 ANTILLA AVE
CORAL GABLES FL 33134**

Mailing Address
**P.O. BOX 143392
CORAL GABLES FL 33114**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-36222-03

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BELL, YOLANDA P
15 ANTILLA AVE
CORAL GABLES FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$550.00

**After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **BELL, YOLANDA P**
STREET ADDRESS **5126 HAWKS NEST**
CITY-ST-ZIP **MCKINNEY TX 75070**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **BELL, DARRYL L**
STREET ADDRESS **P.O. BOX 143392**
CITY-ST-ZIP **CORAL GABLES FL 33114**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **BELL, LEROY C SR.**
STREET ADDRESS **1712 DAUPHIN DR.**
CITY-ST-ZIP **FORT WASHINGTON MD 20744**

TITLE ☒ Change ☐ Addition
NAME **BELL, LEROY C. SR**
STREET ADDRESS **P.O. Box 441072**
CITY-ST-ZIP **FORT WASH MD 20744**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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:

SIGNATURE REQUIRED
DARRYL BELL

09/02/03

305 799 5986

Date

Daytime Phone #

CR2E034 (4/03)

Attachment
80147533

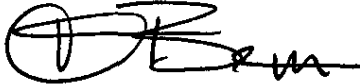
September 02, 2003
Florida Department of State
Secretary of State

Re: UBR Late Fee for BELLJOHAWK, CORP. (Document P02000031696)

Please accept this request for waiver of late fee for the above referenced corporation. Unfortunately due to problems associated with the receipt of mail at the listed PO Box Address several pieces of mail, including the prior notice, were not received.

Sincerely,

Darryl Bell
Treasurer



9/2/03

ATTACHED TO UBR N/ \$150.00 BOA CHK #1007

FORWARDED TO ACCOUNT MAN