## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE 4

## Mar 03, 2008 8:00 am Secretary of State DOCUMENT # P03000077043 03-03-2008 90391 001 \*\*\*\*75.00 1. Entity Name BELLMAR LAND, INC. 03-03-2008 90391 002 \*\*\*\*75.00 Principal Place of Business Mailing Address 66002174 14171 LEANING PINE DR. 14171 LEANING PINE DR. MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014 02072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0091672 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BELLO, ALBERTO** DO NOT WRITE 14171 LEANING PINE DR. MIAMI LAKES, FL 33014 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. à After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE MARTINEZ, RAFAEL NAME STREET ADDRESS 9741 NW 24 TERR CITY-ST-ZIP MIAMI, FL 33172 TITLE BELLO, ALBERTO NAME STREET ADDRESS 14171 LEANING PINE DR. CITY-ST-ZIP MIAMI LAKES, FL 33014 TITLE NAME \_ STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this typing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

INTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED