# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 08, 2007**
**Secretary of State**

DOCUMENT# P03000105185

**Entity Name:** BEL COMPOSITE AMERICA INC.

**Current Principal Place of Business:**

19801 E. COUNTRY CLUB DRIVE
SUITE 306
AVENTURA, FL 33180

**New Principal Place of Business:**

3765 PIEDMONT STREET
HOLLYWOOD, FL 33021

**Current Mailing Address:**

19801 E COUNTRY CLUB DR.
STE. 306
AVENTURA, FL 33180

**New Mailing Address:**

3765 PIEDMONT STREET
HOLLYWOOD, FL 33021

**FEI Number: 86-1083677** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ZVI RAFILOVICH, CPA, P.A.
2229 SHERIDAN STREET
HOLLYWOOD, FL 33020 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRED ( ) Delete
Name: KESSELMAN, ARIEL
Address: 19801 E COUNTRY CLUB DR., STE. 306
City-St-Zip: AVENTURA, FL 33180

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition
Name: KESSELMAN, ARIEL
Address: 3765 PIEDMONT STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Change (X) Addition
Name: GERSHFELD, RAN
Address: 3765 PIEDMONT STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Change (X) Addition
Name: SHAHAF, NADAV
Address: 3765 PIEDMONT STREET
City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZVI RAFILOVICH CPA POA 01/08/2007

Electronic Signature of Signing Officer or Director — Date