

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080985

Entity Name: BEL-MAR HOLDINGS, INC.

FILED  
Jan 20, 2006  
Secretary of State

**Current Principal Place of Business:**

2165 NW 19 AVENUE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

2165 NW 19 AVENUE  
MIAMI, FL 33142

**New Mailing Address:**

FEI Number: 20-1787399      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MOLLERA, LIZETTE  
2165 NW 19 AVENUE  
MIAMI, FL 33142 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: D ( ) Delete  
Name: MOLLERA, LIZETTE  
Address: 525 NW 125 AVENUE  
City-St-Zip: MIAMI, FL 33182

Title: D ( ) Delete  
Name: MOLLERA, RAUL  
Address: 525 NW 125 AVENUE  
City-St-Zip: MIAMI, FL 33182

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

Title: D (X) Change ( ) Addition  
Name: MOLLERA, LIZETTE  
Address: 2165 NW 19 AVE  
City-St-Zip: MIAMI, FL 33142

Title: D (X) Change ( ) Addition  
Name: MOLLERA, RAUL  
Address: 2165 NW 19 AVE  
City-St-Zip: MIAMI, FL 33142

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: LIZETTE MOLLERA

D

01/20/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date