

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000142101

Entity Name: BELLA CUSTOM HOMES, INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

39 BARTON AVE.
ROCKLEDGE, FL 32955

New Principal Place of Business:

845 HANAU AVENUE NW
PALM BAY, FL 32907

Current Mailing Address:

39 BARTON AVE.
ROCKLEDGE, FL 32955

New Mailing Address:

845 HANAU AVENUE NW
PALM BAY, FL 32907

FEI Number: 20-1750017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARGIOTTA, FRANCIS
39 BARTON AVE.
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

TALEB, HAITHAM
845 HANAU AVENUE NW
PALM BAY, FL 32907 US

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: HAITHAM TALEB

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: MARGIOTTA, FRANCIS
Address: 39 BARTON AVE.
City-St-Zip: ROCKLEDGE, FL 32955

Title: D/S () Delete
Name: MARGIOTTA, CARIN E
Address: 39 BARTON AVE.
City-St-Zip: ROCKLEDGE, FL 32955

Title: V () Delete
Name: TALEB, HAITHAM
Address: 845 HANAU AVE., N.W.
City-St-Zip: PALM BAY, FL 32907

Title: V (X) Delete
Name: ERDMANN, JAMES F
Address: P.O. BOX 453
City-St-Zip: COCOA, FL 32923

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: TALEB, HAITHAM
Address: 845 HANAU AVENUE NW
City-St-Zip: PALM BAY, FL 32907

Title: VP (X) Change () Addition
Name: MARGIOTTA, FRANCIS
Address: 39 BARTON AVE.
City-St-Zip: ROCKLEDGE, FL 32955

Title: D (X) Change () Addition
Name: DIB, HIAM
Address: 845 HANAU AVENUE NW
City-St-Zip: PALM BAY, FL 32907

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HAITHAM TALEB

DPST

01/05/2007

Electronic Signature of Signing Officer or Director

Date