

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90209 006 ***150.00

DOCUMENT # P05000086014 1. Entity Name LA BELLE LAND INVESTMENTS CO.					
Principal Place of Business 800 W CYPRESS CREEK ROAD SUITE 470 FT LAUDERDALE, FL 33309			Mailing Address 800 W CYPRESS CREEK ROAD SUITE 470 FT LAUDERDALE, FL 33309		
2. Principal Place of Business 800 W. CYPRESS CREEK ROAD <small>Suite, Apt. #, etc.</small> SUITE 465 <small>City & State</small> FT. LAUDERDALE, FL <small>Zip</small> 33309		3. Mailing Address 800 W. CYPRESS CREEK ROAD <small>Suite, Apt. #, etc.</small> SUITE 465 <small>City & State</small> FT. LAUDERDALE, FL <small>Zip</small> 33309		4. FEI Number 56-2519529 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		5022006 Chg-P CR2E034 (11/05)			
6. Name and Address of Current Registered Agent LEGAL, LARRY 800 W CYPRESS CREEK ROAD SUITE 470 FT LAUDERDALE, FL 33309				7. Name and Address of New Registered Agent <small>Name</small> <small>Street Address (P.O. Box Number is Not Acceptable)</small> <small>City</small> FL <small>Zip Code</small>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	D LEGAL, LARRY 800 W CYPRESS CREEK RD, #470 FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete			
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	D REYNAERT, JEROME PO BOX 1059 ALVA, FL 33920	<input type="checkbox"/> Delete			
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	_____ _____ _____ _____	<input type="checkbox"/> Delete			
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	_____ _____ _____ _____	<input type="checkbox"/> Delete			
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	_____ _____ _____ _____	<input type="checkbox"/> Delete			
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	_____ _____ _____ _____	<input type="checkbox"/> Delete			
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	_____ _____ _____ _____	<input type="checkbox"/> Delete			
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	_____ _____ _____ _____	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowerments.					
SIGNATURE: <i>Larry Legal</i> LARRY LEGAL 5-1-6 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					