

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000032717

FILED
Mar 09, 2009
Secretary of State

Entity Name: BELLAMAN INC.

Current Principal Place of Business:

6000 ISLAND BLVD.
2802
AVENTURA, FL 33160 US

Current Mailing Address:

6000 ISLAND BLVD.
2802
AVENTURA, FL 33160 US

New Principal Place of Business:

17315 COLLINS AVENUE
805
SUNNY ISLES BEACH, FL 33160 US

New Mailing Address:

17315 COLLINS AVENUE
805
SUNNY ISLES BEACH, FL 33160 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRIMAN, SALVADOR
6000 ISLAND BLVD.
2802
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

CRUZ, IRMA
17315 COLLINS AVENUE
805
SUNNY ISLES BEACH, FL 33160 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: IRMA CRUZ

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BRIMAN, SALVADOR
Address: 6000 ISLAND BLVD., APT. 2802
City-St-Zip: AVENTURA, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CRUZ, IRMA
Address: 17315 COLLINS AVENUE, UNIT 805
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

I hereby certify that the information supplied with this filing does not qualify 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: IRMA CRUZ

DP

03/09/2009

Electronic Signature of Signing Officer or Director

Date