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Feb 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P25881

(4)

1. Corporation Name
BELGRANO PROPERTIES CORP.

Principal Place of Business

316 N.E. 2ND STREET
MIAMI FL 33132

Mailing Address

316 N.E. 2ND STREET
MIAMI FL 33132-2215

3. Date Incorporated or Qualified
09/01/1989

3a. Date of Last Report
03/25/1996

4. FEI Number
65-0156394

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

BARKEMA, FRANKLIN
1825 COLLINS AVE
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Sandra B. Mortham*

(NOTE: Registered Agent's signature required when reinstating)

DATE *1/2/97*

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME RIANDE P., IDELFONSO
STREET ADDRESS PALM CHMBRS, FISHLOCK RD
CITY-ST-ZIP ROADTOWN, TORTOLA, BV

TITLE VD ☐ DELETE
NAME DE RIANDE, YOLANDA LUZZI
STREET ADDRESS PALM CHMBRS, FISHLOCK RD
CITY-ST-ZIP ROADTOWN, TORTOLA, BV

TITLE SD ☐ DELETE
NAME RIANDE L., NOEL
STREET ADDRESS PALM CHMBRS, FISHLOCK RD
CITY-ST-ZIP ROADTOWN, TORTOLA, BV

TITLE D ☐ DELETE
NAME DEVICTORIA, LUCIE RIANDE
STREET ADDRESS PALM CHMBRS, FISHLOCK RD
CITY-ST-ZIP ROADTOWN, TORTOLA, BV

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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; that the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)