

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90093 030 ***150.00

DOCUMENT # P25881

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/01/1989

4. FEI Number

65-0156394

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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

JACINTO BOX

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

1825 COLLINS AVENUE

83

84 City

MIAMI BEACH

FL

85 Zip Code

33139

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

Signature, typed or printed name of registered agent and not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

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

☒ DELETE

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

☐ DELETE

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

☐ DELETE

TITLE D
NAME DEVICTORIA, LUCIA RIANDE
STREET ADDRESS PALM CHMBRS, FISHLOCK RD
CITY-ST-ZIP ROADTOWN TO

☐ DELETE

TITLE D
NAME RIANDE DE MINDREAU, DOLORES
STREET ADDRESS PALM CHBRS, FISHLOCK RD
CITY-ST-ZIP ROADTOWN TO

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change

☐ Addition

2.1 TITLE P
2.2 NAME DE RIANDE, YOLANDA LUZZI
2.3 STREET ADDRESS PALM CHMBRS, FISHLOCK RD
2.4 CITY-ST-ZIP ROADTOWN, TORTOLA, BVI

☒ Change

☐ Addition

3.1 TITLE VP
3.2 NAME RIANDE L., NOEL
3.3 STREET ADDRESS PALM CHMBRS, FISHLOCK RD
3.4 CITY-ST-ZIP ROADTOWN, TORTOLA, BVI

☒ Change

☐ Addition

4.1 TITLE S
4.2 NAME RIANDE DE VICTORIA, LUCIA
4.3 STREET ADDRESS PALM CHMBRS, FISHLOCK RD
4.4 CITY-ST-ZIP ROADTOWN TO

☒ Change

☐ Addition

5.1 TITLE T
5.2 NAME RIANDE DE MINDREAU, DOLORES
5.3 STREET ADDRESS PALM CHAMBERS, FISHLOCK RD
5.4 CITY-ST-ZIP ROADTOWN TO

☒ Change

☐ Addition

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

☐ Change

☐ Addition

14. I 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 or 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 on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)