

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 MAR -1 AM 8:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

<b>DOCUMENT # P25881</b>			
Entity Name <b>BELGRANO PROPERTIES CORP.</b>			
Principal Place of Business <b>316 N.E. 2ND STREET MIAMI FL 33132</b>		Mailing Address <b>316 N.E. 2ND STREET MIAMI FL 33132-2215</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>65-0156394</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>BOX, JACINTO 1825 COLLINS AVE MIAMI BEACH FL 33139</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
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.			
SIGNATURE		DATE	
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. <input type="checkbox"/>		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
11. OFFICERS AND DIRECTORS			
TITLE	P	<input checked="" type="checkbox"/> Delete	
NAME	DE RIANDE, YOLANDA L		
STREET ADDRESS	PALM CHMBRS, FISHLOCK RD		
CITY-ST-ZIP	ROADTOWN, TORTOLA, BVI		
TITLE	VP	<input checked="" type="checkbox"/> Delete	
NAME	RIANDE L, NOEL		
STREET ADDRESS	PALM CHMBRS, FISHLOCK RD		
CITY-ST-ZIP	ROADTOWN, TORTOLA, BVI		
TITLE	S	<input checked="" type="checkbox"/> Delete	
NAME	DEVICTORIA, LUCIA RIANDE		
STREET ADDRESS	PALM CHMBRS, FISHLOCK RD		
CITY-ST-ZIP	ROADTOWN TO		
TITLE	T	<input checked="" type="checkbox"/> Delete	
NAME	RIANDE DE MINDREAU, DOLORES		
STREET ADDRESS	PALM CHBRS, FISHLOCK RD		
CITY-ST-ZIP	ROADTOWN TO		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	DIRECTOR/ PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DE RIANDE, YOLANDA LUZZI		
STREET ADDRESS	VIA ESPAÑA Y CALLE RICARDO ARIAS		
CITY-ST-ZIP	PANAMA 7, REPUBLIC OF PANAMA		
TITLE	DIRECTOR/ VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RIANDE, NOEL ANTONIO		
STREET ADDRESS	VIA ESPAÑA Y CALLE RICARDO ARIAS		
CITY-ST-ZIP	PANAMA 7, REPUBLIC OF PANAMA		
TITLE	DIRECTOR/ SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RIANDE DE VICTORIA, LUCIA		
STREET ADDRESS	VIA ESPAÑA Y CALLE RICARDO ARIAS		
CITY-ST-ZIP	PANAMA 7, REPUBLIC OF PANAMA		
TITLE	DIRECTOR/ TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RIANDE, DE MINDREAU, DOLORES		
STREET ADDRESS	VIA ESPAÑA Y CALLE RICARDO ARIAS		
CITY-ST-ZIP	PANAMA 7, REPUBLIC OF PANAMA		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

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13. 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 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 11 or Block 12 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

17-1-2000 (507) 264-537

Date Daytime Phone