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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000004475 (8)**

1. Corporation Name

BELLE HAVEN, INC.



Principal Place of Business

**1133 4TH STREET
SARASOTA FL 34236**

Mailing Address

**1133 4TH STREET
SARASOTA FL 34236**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip **24** Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip **29** Country

3. Name and Address of Current Registered Agent

**SANCHEZ, ALBERT A JR.
1133 4TH STREET
SARASOTA FL 34236**

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 607.1506, 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 607.0502, Florida Statutes.

SIGNATURE

Signature of person authorized to file this report

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS

D ☐ DELETE
TITLE
NAME **SANCHEZ, CAROLYN E**
STREET ADDRESS **531 N. SPOONBILL DRIVE**
CITY-STATE-ZIP **SARASOTA FL 34236**

V ☐ DELETE
TITLE
NAME **BLUMBERG, JERRY**
STREET ADDRESS **1133 FOURTH ST**
CITY-STATE-ZIP **SARASOTA FL**

☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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TITLE
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STREET ADDRESS
CITY-STATE-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

ALBERT A. SANCHEZ, JR.

4/14/96

(941) 952-9600

CR2E034 (12/95)