## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

**ANNUAL REPORT** 1996 DIVISION OF CORPORATIONS P93000040140 (4) DOCUMENT # 1. Corporation Name BELLISSIMO, INC.



SS   BCPRICELY ST   BOCA MATCH FL 33487	Disease 1.59							
2. Principal Place of Business   2a. Making Address   2b. Making Address   2c. Making Address	855 BERKELY	Mailing Address  855 BERKELY \$T.				aasii Abiit Bibit Biş	er (187) 9191( \$51) 155)	
Section   Control   Cont	BOCA RATOR	I FL 33487	BOCA RATON FL 33	487		2 Data based on the control of the c	les a	
20								
Suite, Apt. #, etc. 27 City & State 28 City & State 29 City & State 20 City &		ace of Business	<u></u> —, "					Applied For
27		# pto				65-0445786	·	Not Applicable
28	22					5. Certificate of Status Desired	_ <b>\$</b>	
25		,						
TREPANIER, DIANE   855 BERKELY ST.   82   82   82   83   83   83   83   83		Country	Zip	<u> </u>	try:	8. This corporation has liability for	ntangibie tax un	der s. 199.032,
REPAILER, DIANE   855 BERKELY ST.   862   Street Address (P.O. Box Number is Not Acceptable)   85	24		Lini.l	30	·			
TREPANIER, DIANE 855 BERKELY ST. BOCA RATON FL 33487  84		9. Name and Address of Cur	rent Registered Agent		al Tu	10. Name and Address of New R	egistered Agei	<u>1t</u>
855 BERKELY ST. BOCA RATION FL 33487  84	<b>TDF811</b>	EO DANC		8	Name			
BOCA RATON FL 33487  11. Pursuant to the provisions of Sections EO7 0502 and E07.150e, Floricity Statutes, the above named corporation adminish this statement for the purpose of changing its registered agent. I a familier with, and accept the obligations of Sections E07 0502 and E07.150e, Floricity Statutes, the above named corporation's board of directors. Thereby, accept the appointment as registered agent. I a familier with, and accept the obligations of Section Statutes was authorized by the corporation's board of directors. Thereby, accept the appointment as registered agent. I a familier with, and accept the obligations of Section Statutes.  SIGNATURE  2. OF FICE PS AND DISPRICIONS  13. ADDITIONS/CHANGES TO OFFICE IS AND DISPRICIONS IN 12.  THERE ADDITIONS CHANGES TO OFFICE IS AND DISPRICIONS IN 12.  THE PANIER, DIANE  STREET ADDRESS  OTH-ST-ZPP  DELETE  1 THRE  1 THR					Street Add	dress (P.O. Box Number is Not Acceptable)		
1.1. Pursuant to the provisions of Sections E07 0502 and 647.1508. Florids Studies, the eleven nerned corporation's sharies this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the appointment is registered agent 1 are registered agent, and the collegeons of Section 607.0505. Florids Studies.    1.2.				0	13			
Part   Pursuant to the provisions of Sections ED7 0502 and 617/1508, Flerich Studies, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Frontial SubJict change wars authorized by the corporation's sharids the appointment as registered agent. I are registered agent to a statement with, and accept the obligations of, Section 607,0505. Flerich Studies.    SIGNATURE	DUUM IN	410N FL 3348/		]*	,3			
11. Pursuant to the provisions of Sections EQ 0000 and 67/L1068. Funds Stutistics, the alticute flower harmed corporation's statement for the purpose of changing its registered agent or registered agent or both, in the Stutie of Florids. Stutistics was authorized by the corporation's trained of directors. Theretry accept the appointment as registered agent if an accept the obligations of, Section 607,0505. Funds Stutistics  SIGNATURE  Signature  Signature  Table				8	4 City		<b></b> 85	Zip Code
Signature	11 Pursuant t	o the provisions of Sections E07.05	OS cod 607 1509 Florida Stat	utos, tuo et sus	1		——————————————————————————————————————	<u> </u>
NAME   STREET ADDRESS   12 NAME   13 STREET ADDRESS   13 STREET ADDRESS   14 CITY_ST_7P   15	12.	OFFICERS A	AND DIRECTORS	13.			CERS AND DIR	
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CITY-ST-ZIP  6.4 City ST-ZIP  6.4 City ST-ZIP  14. I do hereby certify that the information supplied with this filing is vountarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further confit that the information supplied with this filing is vountarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further				6.4 City	51.70			

oath, that I am an officer or direction of the corporation or the response the 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 or an attached, with an address

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Eliginia Proces