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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

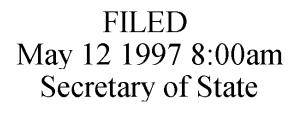
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P93000046382 (6)

BELLBECK, INC.





Principal Place of Business Mailing Address 19940 MONA RD 19940 MONA RD STE 2 STE 2 TEQUESTA FL 33469 TEQUESTA FL 33469-2680 US US	3. Date Incorporated or Qualified 3a. Date of Last Report 06/25/1993 04/25/1996
Principal Flace of Business 2a. Mailing Address	4. FEI Number Applied For
21 152 E. Hampton Way 26 152 E. Hampto	65-0419861 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.	SR 75 Additional
22 27	5. Certificate of Status Desired Fee Required
City & State City & State	Election Campaign Financing \$5.00 May Be
23 Jupiter +L 28 Jupiter +L	Trust Fund Contribution Added to Fees
	Intry 8. This corporation has liability for intangible tax under s. 199.032,
24 33458 25 Falm Bch 29 33458 30 Fa	tim Bch Florida Statutes Yes No
	81 Name
BELL, GREIG 19940 MONA RD €2	
TEQUESTA FL 33489	82 Street Address (P.O. Box Number is Not Acceptable)
IEGUEOIA I E 00700	83
	84 City 32 Jap Code FI 85 Zip Code 232 JS9
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a	bove-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 authorize agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Sta	d by the corporation's board of directors. I hereby accept the appointment as registered
	iolos,
SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE: Registere	d Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D DELETE 1.1 T	TLE Change Addition
NAME BECKMAN, ART 1.2 N	AME
STREET ADDRESS 1851 W INDIANTOWN RD SUITE 204 1.3 S	FREET ADDRESS
CHY-SI-ZIP JUPITER FL 33458 14.0	TY-ST-ZIP
TITLE DELETE 21 T	TLE Change Addition
NAME BELL, GREIG 22 N	
	TREET ADDRESS 152, & Hampton Way
CHY-ST-ZIP TEQUESTA FL 2.46	11Y-SI-ZIP JUDITER, FL 33458
TITLE DELETE 3.1 TI	TLE Change Addition
NAME 3.2 N	AME.
STREET ACORESS 3.3.S	TREET ADDRESS
	CITY-ST-ZIP
TITLE DELETE 417	TLE Change Addition
NAME 4 21	IAME
STREET ADDRESS 4.3S	TREET ADDRESS
	ity-st-zip
TITLE DELETE 5.1.T	TLE Change Addition
NAME 5.2 N	AME
STREET ADDRESS 5.3 S	TREET ADDRESS
	ITY - ST - ZIP
TILLE DELETE 6.1 T	TLE Change Addition
NAM: 62 N	AME
OFFICE ADDRESS	TOTAL ACOUNTES
STREEL ADDRESS 6.3 S	TREET ADDRESS

14. Ido hereby certify that the information supplied with this filling 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.

SIGNATURE: