

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2007 8:00 am
Secretary of State

03-28-2007 90009 032 ***150.00

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1. Entity Name
CONSOLIDATED BELIZE SERVICES, LTD. INC.



Principal Place of Business
9220 SW 18 TERR
MIAMI, FL 33165 US

Mailing Address
9220 SW 18 TERR
MIAMI, FL 33165 US

40043343



2. Principal Place of Business - No P.O. Box #

641 NW 132 PL

Suite, Apt. #, etc.

Miami FL

City & State

33182

Zip

Country

3. Mailing Address

641 NW 132 PL

Suite, Apt. #, etc.

Miami FL

City & State

33182

Zip

Country

03262007

Chg-P

CR2E034 (12/06)

4. FEI Number

65-0433864

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARIAS, EDWIN
10218 SW 1ST STREET
MIAMI, FL 33174

7. Name and Address of New Registered Agent

Name Arias Edwin
Street Address (P.O. Box Number is Not Acceptable)

641 NW 132 PL

City Miami

FL

Zip Code

33182

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/26/07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME BANZ, GUNTER
STREET ADDRESS 10218 SW 1ST STREET
CITY-ST-ZIP MIAMI, FL 33174

TITLE ST ☐ Delete
NAME ARIAS, EDWIN
STREET ADDRESS 10218 SW 1ST STREET
CITY-ST-ZIP MIAMI, FL 33174

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition
NAME Banz, Gunter
STREET ADDRESS 641 NW 132 PL
CITY-ST-ZIP Miami FL 33182

TITLE ST ☒ Change ☐ Addition
NAME Arias, Edwin
STREET ADDRESS 641 NW 132 PL
CITY-ST-ZIP Miami FL 33182

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 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 #

3/26/07