FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000009853 (0)**

1. Corporation Name

M. BELLISH, INC.

Principal Place of Business	Mailing Address
227 YACHT CLUB DRIVE FORT WALTON BEACH FL 32548	227 YACHT CLUB DRIVE FORT WALTON BEACH FL 32548

3. Date Incorporated or Qualified: 02/07/1994
3a. Date of Last Report: 02/20/1995

2. Principal Place of Business
21: 27 Lakeshore Drive
22: Suite, Apt. #, etc.
23: City & State: Shalimar, FL 32579
24: Zip: 32579-2209
25: Country: OK2/0052

2a. Mailing Address
26: 27 Lakeshore Dr.
27: Suite, Apt. #, etc.
28: City & State: Shalimar, FL
29: Zip: 32579-2209
30: Country: OK2/0052

4. FEI Number: 59-3226606 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

COOPER, ANITA L.
227 YACHT CLUB DRIVE
FT. WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

81 Name: Cooper, Anita L.
82 Street Address (P.O. Box Number is Not Acceptable): 27 Lakeshore Drive
83:
84 City: Shalimar **FL** 85 Zip Code: 32579-2209

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Anita L. Cooper — Anita L. Cooper — 5/31/96
Signature, typed or printed name of registered agent and title if applicable — (N.OTE: Registered Agent Signature required when signing) — Date

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPST	☐ DELETE	1.1 TITLE	DPST	☑ Change ☐ Addition
NAME	COOPER, ANITA L		1.2 NAME	COOPER, ANITA L.	
STREET ADDRESS	227 YACHT CLUB DR.		1.3 STREET ADDRESS	27 Lakeshore Drive	
CITY-ST-ZIP	FT WALTON BEACH FL		1.4 CITY-ST-ZIP	Shalimar, FL 32579-2209	
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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 on an attachment with an address.

SIGNATURE: Anita L. Cooper — 5/31/96 — (904) 651-2422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

Anita L. Cooper