SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000026010 (6) DOCUMENT #

BELLE ISLE DEVELOPMENT CORP.

Mailing Address Principal Place of Business 1000 VENETIAN WAY 1000 VENETIAN WAY **SUITE 102** SUITE 102 DO NOT WRITE IN THIS SPACE MIAMI FL 33139 MIAMI FL 33139 3. Date Incorporated or Qualified 3a. Date of Last Report 04/05/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 66-5048210 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Country Zip This corporation owes or has paid the current year Intangible Zip Personal Property Tax due June 30. 29 30 24 25 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 Name LADRUZZO, VICTOR J. 1000 VENETIAN WAY #102 Street Address (P.O. Box Number is Not Acceptable) SUITE 102 **B3 MIAMI FL 33139** Zip Code 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** Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITLE YOUNG, RICHARD S. 1.2 NAME NAME 1000 VENETIAN WAY #102 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

FILED Sep 19 1997 8:00am Secretary of State

Addition Change

6.4 CiTY-ST-ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplies with this filing 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 apport 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 received or true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name am an officer or director of the appears in Block 12 or Block 15 changed, or on a

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE