COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

GNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Sep 13, 1999 8:00 am Secretary of State

09-13-1999 90004 015 ***550.00

(954)

344-8936

OCUMENT# P94000081312

3ELL AMERICAN CORPORATION							
- Land Committee of the					_		
ncipal Place of Business Mailing Address						- 1 1081/1081 (10 1011) 81811 88111 88111 88111 88181 48183 11888 41/8) 1/8/9 1/9/9 (10)	
! N.W. 114TH AVENUE 3122 N.W. 114TH AV			:				
AL SPRINGS FL 33065 CORAL SPRINGS FL 33065							
		US	US			DO NOT WRITE IN THIS SPACE	
						3, Date Incorporated or Qualified	
						11/03/1994	
Principal Place of Business		·	2a. Mailing Address			4. FEI Number Applied For	
			26			65-0605712 Not Applicable	
Suite, Apt. #, etc.		— · · · ·	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required	
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
ony a otalo		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cot	untry		8. This corporation owes the current year	
·	25	29	30			Intangible Personal Property. Yes No	
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New Registered Agent	
				81	Name		
BELL, RANDALL B.				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)	
3122 N.W. 114TH AVENUE				Street Address (F.O. Box Number is Not Acceptable)			
COR	AL SPRINGS FL 33065						
				84 City		85 Zip Code	
					•	FL	
office or	t to the provisions of sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was	authorize	id by	the corporation	ation submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered	
3NATURE	Classics hand as existed none of exciptored ago	nt and title of contingbin	OTE: Beniet	arad Ac	ant cionature coguis	red when reinstating) DATE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: OFFICERS AND DIRECTORS				13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	DPT STREET			1.1 TITLE		Change Addition	
E	BELL, RANDALL B			1.2 NAME			
:ET ADDRESS	3122 N.W. 114TH AVENUE		1.3 \$1	1.3 STREET ADDRESS			
-ST-ZIP	CORAL SPRINGS FL			1.4 CITY-ST-ZIP			
=	DPS	DELETE	DELETE 2.1 TIT			Change Addition	
E	BELL, LYNETTE M	•		AME			
ET ADDRESS	3122 N.W. 114TH AVENUE			2.3 STREET ADDRESS			
-ST-ZIP	CORAL SPRINGS FL		2.4 C	ITY-\$T-	ZIP `		
=		DELETE 3.1		TLE		Change Addition	
E			3.2 NAME				
ET ADDRESS			3.3 STREET ADDRESS		ADDRESS		
ST-ZIP			_	3.4 CITY-ST-ZIP			
₹ 	DELETE			4.1 TITLE		. Change Addition	
€				4.2 NAME			
ET ADDRESS	.50			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
ST-ZIP					ZIP	Change Addition	
E :		DELETE				Change Addition	
ET ADDRESS	ss		1	5.2 NAME 5.3 STREET ADDRESS			
ST-ZIP			4	5.4 CITY-ST-ZIP			
51-21		DELETE	6.1 TI		Z.N	Change Addition	
<u>2</u>		Carl Diese Le		6.2 NAME		C Onlarge D Audition	
ET ADDRESS	ł			6.3 STREET ADDRESS			
ST-ZIP				TY-ST-			
l hereby ce	ertify that the information supplied with	this filing does not qualify for				on 119.07(3)(i), Florida Statutes. I further certify that the information	
an officer of	on the annual report or supplemental or director of the corporation or the re-	annual report is true and accu ceiver or trustee empowe ed	rate and o execute	that r this	my signature si report as requ	on 119.07(3)(i), Florida Statutes. I further certify that the information thall have the same legal effect as if made under oath; that I am aired by Chapter 607, Florida Statutes; and that my name appears	
IN BIOCK 12	or Block 13 if changed, or on an an	remenu with an address.				(a ~u)	