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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000087252 (0)

GIBBONS, TUCKER, MILLER, WHATLEY & STEIN, P.A.

BELTRAM DEVELOPMENT, INC.

101 E KENNEDY BLVD

SUITE 1000 **TAMPA FL 33602** 

Principal Place of Business Mailing Address 6800 N FLORIDA AVE 6800 N FLORIDA AVE TAMPA FL 33604 TAMPA FL 33604 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/30/1994 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0543247 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes Yes 25 29 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

City Zip Code 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.

Name

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

SIGNATURE Signature, typed or profiled narrie of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE Change Addition 1.1 TIDE TITLE NAME BELTRAM, DANIEL G 1.2 NAME 6800 N FLORIDA AVE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33604 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 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 CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

14. Thereby certify that the information supplied 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 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 this corporation or the possession in proposers of the corporation of the possession in the possession of the corporation of the possession in the possession of the corporation of of the corporat Block 12 or Block 13

SIGNATURE:

2-13-98

813-231-2212

**FILED** 

Mar 10 1998 8:00am

Secretary of State