

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000090743 (3)

1. Corporation Name

BELCAR INVESTMENTS, INC.



Principal Place of Business

Mailing Address

801 BRICKELL AVE.
SUITE 1301
MIAMI FL 33131

801 BRICKELL AVE.
SUITE 1301
MIAMI FL 33131

2. Principal Place of Business

2a. Mailing Address

21 701 Brickell Avenue
Suite, Apt. #, etc.

26 701 Brickell Avenue
Suite, Apt. #, etc.

22 Suite 850

27 Suite 850

City & State

City & State

23 Miami, Florida

28 Miami, Florida

Zip

Country

Zip

Country

24 33131

25 USA

29 33131

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/15/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0567959

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

10. Name and Address of New Registered Agent

SULLIVAN, JOHN S JR.
801 BRICKELL AVENUE
SUITE 1301
MIAMI FL 33131

81 Name

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

701 Brickell Avenue

83

Suite 850

84

City

Miami

FL

85

Zip Code

33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 location of signature

Signature typed or printed name of registered agent and location of signature

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME
SULLIVAN, JOHN S
STREET ADDRESS
801 BRICKELL AVE., STE. 1301
CITY-ST-ZIP
MIAMI FL 33131

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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CITY-ST-ZIP

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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
701 Brickell Avenue
Miami, Florida 33131

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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: John S. Sullivan / Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/96

Date

(305) 381-8340

Daytime Phone

CR2E034 (12/95)