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

**PROFIT** CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

Mar 25 1998 8:00am Sandra B. Mortham Secretary of State

**FILED** 

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DOCU	MENT # P9500	00030044 (8)				
	BELINVESTS, INC.	` '				
""	DELITICOTO, IITO.			I MARIJATA INA MARIA ANJALATAN BERMERAN	II <b>an</b> ima isali animi manin animi alba inahi	
Principal Place of Business Mailing Address					11 86188 11111 88111 88111 81811 8181 1881	
2400 TARPON RD. P.O BOX 11452 NAPLES FL 34102 NAPLES FL 34101						
US	V1106	US		DO NOT WRITE	IN THIS SPACE	
				3. Date Incorporated or Qualified		
2. Principal F	Place of Business	2a. Mailing Address		04/12/1995 4. FEI Number	Applied For	
21 26				65-0595906	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & Star	10	City & State			- Fee Required	
23	.0	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has pai	· · · · · · · · · · · · · · · · · · ·	
24	25		30	Personal Property Tax due June	30. 🗌 Yes 🗌 No	
	9, Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Reg	gistered Agent	
	OLTINCK, STEFAAN			BULTINCK		
2400 TARPON RD. NAPLES FL 34102			82 Street Address (P.O. Box Number is Not Acceptable)			
NAPLES FL 34102			83	- · · · · · · · · · · · · · · · · · · ·		
			84 City		85 Zip Coda	
					FL   `	
11. Pursuant office or	to the provisions of Sections 607.0 registered agent, or both, in the Sta	502 and 607.1508, Florida Statute ite of Florida. Such change was a	is, the above-named cor uthorized by the corpora	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered	
1	am familiar with, and accept the obl	ligations of, Section 607.0505, Flo	rida Statutes.	think Drew Last	212108	
SIGNATURE	Signature, typed or printed name of registered	agent and little if applicable (NOTE	: Registered Agent signature requ	uired when reinstaling)	DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	D DOLTMON OTTERAN	☐ DELETE	1.1 TITLE	BULTINCK	Change  Addition	
NAME STREET ADDRESS	BOLTINCK, STEFAAN 2400 TARPON RD		1.2 NAME	BOL! NOOK		
CITY-ST-ZIP	NAPLES FL		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			
TITLE	100,02012	DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS	Ī		2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY+ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME OZDECZ ADDODEGO	ł		3.2 NAME			
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CHTY-ST-ZIP	<u>                                     </u>	· · · · · · · · · · · · · · · · · · ·	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 TITLE		DELETE	5.4 CITY+ST-ZIP 6.1 TITLE		Change Addition	
NAME		_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6.2 NAME		4Ra 1aowioti	
STREET ADDRESS			6.3 STREET ADDRESS			

6.4 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 the corporation or the receiver or trustee employeed 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.

3/17/98