## 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** 

P95000069903 (9) DOCUMENT #

**BELOV & COMPANY, INC.** 

## **FILED** Feb 09 1998 8:00am Secretary of State



| District Discosif District  |   |  | -                     |  |  |   |                                 |               |
|---|---|--|-----------------------|--|--|---|---------------------------------|---------------|
| Principal Place of Business Mailing Address                               |   |  |                       | _  |  |   |                                 |               |
| 17811 NORTH WEST 80TH AVENUE 17811 NORTH WE MIAMI FL 33015 MIAMI FL 33015 |   |  | OTH AVENUE            |  |  |   |                                 |               |
| MINNE PL 33   | oia<br>Oia  | MIAMI FL 33015   |                       | DO NOT WRITE IN THIS SPACE                   |  |   |                                 |               |
|   |   |  |                       |  | 3. Date Incorporated   | or Qualified                                |                                 |               |
|   |   |  |                       |  | 09/12/1995   |   |                                 |               |
| 2. Principal P  | lace of Business  | 2a. Mailing Address  | C                     | - 4  | 4. FEI Number  |   | AF                              | oplied For    |
| 21 178  | II N.W. 80 AVE  | 1-26 17811 N.  | W                     | O Ave.                                       | 65-0622259   |   | XNo                             | ot Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc.                                   |   |  |                       |  | 5. Certificate of Status                                     | Desired                                     | \$8.75                          | Additional    |
| 27  |   |  |                       |  | 6. Continuate of States                                      |   | Fee Re                          | equired       |
| City State - City & State   |   |  | Fla                   |  | 6. Election Campaign   |   | \$5.00                          | May Be        |
| 23 Wid  |   | 28 Miany   | ,                     |  | Trust Fund Contribu  |   |                                 | to Fees       |
| Zip   | Country   | Zip  | ー Cour                | W·S·A·                                       | 8. This corporation ov                                       |   |                                 |               |
| 24 <u>3</u> 30.   |   |  | 30                    | V. 3 //                                      | Personal Property  |   | 74                              | _ No          |
| DI DI   | 9. Name and Address of Curre  | int Hegistered Agent   | B1 Name 7             | 10. Name and Address of New Registered Agent |  |   |                                 |               |
| BLANCO, SONIA   |   |  |                       | oi   Name £                                  | BLANCO, S  | Sonia                                       |                                 |               |
| 17811 NORTH WEST 80TH AVENUE  |   |  |                       | 82 Street Add                                | ress (P.O. Box Number is I                                   | vot Acceptable)                             | we.                             | İ             |
| Mi  | AMI FL 33015  |  |                       | 83   | 18 11 10.16  | · 80 /                                      | ve ·                            |               |
|   |   |  |                       | 83   |  |   |                                 | j             |
|   |   |  | Ī                     | 84 City N                                    | lia mi   | <b>-</b>                                    | 85 Zip.1                        | Code          |
|   |   |  |                       |  |  | F   |                                 | 0/3           |
| 11. Pursuant<br>office or r   | to the provisions of Sections 607.05  | 02 and 607.1508, Florida Statutes<br>le of Florida. Such change was au | s, the ab<br>thorized | love-named corp<br>by the corporat           | poration submits this stater<br>tion's board of directors. H | nent for the purpose<br>hereby accept the a | or changing it<br>ppointment as | registered    |
| agent. I a  | registered agent, or both, in the Stat<br>im familier with, and accept the obli |  |                       | ites.  |  |   | 4-98                            | ŀ             |
| SIGNATURE   | donia X   |  | nia                   |  |  | 1-7   | 7 / 8                           |               |
|   | OFFICEDS At   | gent and lifte if applicable (NOTE:<br>ND DIRECTORS                    | 13.                   | Agent signature requir                       | ADDITIONS/CHANG  | ES TO OFFICERS A                            | ND DIRECTOR                     | 3S IN 12      |
| 12.<br>TITLE  | P   | DELETE   | 1.1 100               | IF [   | ABDITIONOJOI BUILO   | 20 10 01 110210 14                          | Change                          | Addition      |
| NAME  | BLANCO, ADAM A  |  | 1.2 NA                |  |  |   |                                 | _             |
| STREET ADDRESS  | 17811 N W 80 AVE  |  | -                     | HEET ADDRESS                                 |  |   |                                 | -             |
|   | HIALEAH FL  |  | 1                     | Y-ST-ZIP                                     |  |   |                                 | 1             |
| CITY-ST-ZIP<br>TITLE  | 1   | ☐ DELETE   | 21 TIT                |  |  |   | Change                          | Addition      |
| NAME  |   |  | 2.2 NAME              |  |  |   | _ •                             | _             |
| STREET ADDRESS  |   |  | 1                     | HEET ADDRESS                                 |  | 14.   |                                 |               |
| CITY-ST-ZIP   |   |  |                       | TY-ST-ZIP                                    |  |   |                                 |               |
| TITLE   |   | ☐ DELET€   | 3 1 TIT               |  |  |   | Change                          | Addition      |
| NAME  |   | <del></del> ·  | 3.2 NA                |  |  |   | -                               |               |
| STREET ADDRESS  |   |  |                       | REET ADDRESS                                 |  |   |                                 |               |
| CITY-ST-ZIP   |   |  |                       | TY-ST-ZIP                                    |  |   |                                 |               |
| TITLE   |   | DELETE   | 4.1 TIT               |  |  |   | Change                          | Addition      |
| NAME  |   |  | 4. 2 NA               | ME   |  |   |                                 |               |
| STREET ADDRESS  |   |  | 4.3 STF               | REET ADDRESS                                 |  |   |                                 |               |
| CITY-ST-ZIP   |   |  | 4.4 CIT               | Y-ST-ZIP                                     |  |   |                                 |               |
| TITLE   |   | ☐ DELETE   | 5.1 TIT               |  |  | •   | Change                          | Addition      |
| NAME  |   |  | 5.2 NAI               | ME   |  |   |                                 |               |
| STREET ADDRESS  |   |  |                       | REET ADDRESS                                 |  |   |                                 |               |
| CITY-ST-ZIP   |   |  |                       | Y-ST-ZIP                                     |  |   |                                 |               |
| TITLE   |   | DELETE   | 6.1 TIT               |  | ·····  | 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1    | Change                          | Addition      |
| NAME  |   | •  | 6.2 NAI               | ME   |  |   |                                 |               |
| STREET ADDRESS  |   |  |                       | REET ADDRESS                                 |  |   |                                 |               |
| CITY-ST-ZIP   |   |  |                       | Y - S1 - ZIP                                 |  |   |                                 |               |
|   | certify that the information supplied:  | with this filing does not qualify for                                  |                       |  | Section 119.07(3)(i). Florid                                 | la Statutes. I further                      | certify that the                | information   |

r nereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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.

1-14-98