

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

FILED  
Jun 09, 1999 8:00 am  
Secretary of State

06-09-1999 90032 022 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000030305 (2)

1. Corporation Name  
BELLE DU SOIREE, INC.

Principal Place of Business Mailing Address same  
3500 MYSTIC POINTE DRIVE  
TOWER 400 #LPH2  
AVENTURA, FL. 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
04/01/1996

4. FEI Number Applied For  
65-0673086 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing  \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business 2a. Mailing Address 40  
21 Suite, Apt. #, etc. 26 1440 J.F. Kennedy Cswy  
22 City & State 27 Suite 301  
23 City & State 28 North Bay Village, FL.  
24 Zip Country 29 33141 30 USA

9. Name and Address of Current Registered Agent  
Maria Cristina Austin  
3500 Mystic Pointe Dr.  
Tower 400 #LPH 2  
Aventura, FL. 33180

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. 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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Table with 12 rows for Officers and Directors. Includes columns for Title, Name, Street Address, and City-St-Zip. Row 1: Maria Cristina Austin, 3500 Mystic Pointe Dr. LHP 2, Aventura, FL. 33180.

Table with 12 rows for Additions/Changes to Officers and Directors in 12. Includes columns for Title, Name, Street Address, and City-St-Zip.

14. I hereby 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 register 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, with all other like empowered.

SIGNATURE: [Signature] 5-1-99  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

067247  
CR2E034 (11/98)