

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

FILED

May 19 1997 8:00am  
Secretary of State

|                                                       |                                                                                   |                                                                                                           |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1997</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

DOCUMENT # **P96000043719 (9)**

1. Corporation Name  
**BEWELL, INC.**



|                                                                                         |                                                                                  |
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| Principal Place of Business<br><b>7331 CORAL WAY<br/>SUITE 267-C<br/>MIAMI FL 33155</b> | Mailing Address<br><b>7331 CORAL WAY<br/>SUITE 267-C<br/>MIAMI FL 33155-1471</b> |
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|                                                                                                                                                                              |  |                                                                                                                                                                   |  |                                                                                                                                |  |                                                                                                                                                                                                                                           |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 2. Principal Place of Business<br>21 <b>9380 SW 72ND ST</b><br>Suite, Apt. #, etc.<br>22 <b>SUITE 220 B</b><br>City & State<br>23 <b>MIAMI, FL</b><br>Zip<br>24 <b>33173</b> |  | 2a. Mailing Address<br>26 <b>9380 SW 72ND ST</b><br>Suite, Apt. #, etc.<br>27 <b>SUITE 220 B</b><br>City & State<br>28 <b>MIAMI, FL</b><br>Zip<br>29 <b>33173</b> |  | 3. Date Incorporated or Qualified<br><b>05/22/1996</b>                                                                         |  | 3a. Date of Last Report                                                                                                                                                                                                                   |  |
| 4. FEI Number<br><b>65-0683129</b>                                                                                                                                           |  | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                            |  | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                |  | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                                                                                                     |  |
| 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No                             |  | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No                  |  | 9. Name and Address of Current Registered Agent<br><b>NUNEZ, GERARDO<br/>7331 CORAL WAY<br/>SUITE 267-C<br/>MIAMI FL 33155</b> |  | 10. Name and Address of New Registered Agent<br>81 Name <b>OLGA WILLIAMS, ESQ.</b><br>82 Street Address (P.O. Box Number is Not Acceptable)<br><b>416 MENDOZA AVENUE</b><br>83<br>84 City <b>CORAL GABLES</b> FL 85 Zip Code <b>33134</b> |  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                             |  |                     |  |
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| 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 <i>Gerardo Nunez</i><br>Signature of Registered Agent and title if applicable (NOTE: Registered Agent signature required when re-registering)                                                                                                                                                                                                                                                                                                       |  | SIGNATURE <i>Olga Williams</i><br>Signature of Agent signature required when re-registering |  | DATE <i>5/13/97</i> |  |

|                                                |                                                                                                                            |                                                                |                                                                                                                                                                  |
|------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 12. OFFICERS AND DIRECTORS                     |                                                                                                                            | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12          |                                                                                                                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PS<br/>NUNEZ, GERARDO<br/>7331 CORAL WAY, SUITE 267-C<br/>MIAMI FL 33155</b> <input checked="" type="checkbox"/> DELETE | 1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP | <b>P<br/>NUNEZ,<br/>7331 CORAL WAY, SUITE 267-C<br/>MIAMI, FL 33155</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                                            | 2.1 TITLE<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY-ST-ZIP | <b>S<br/>WILLIAMS, OLGA, ESQ.<br/>416 MENDOZA AVENUE<br/>CORAL GABLES, FL 33134</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                                            | 3.1 TITLE<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                                            | 4.1 TITLE<br>4.2 NAME<br>4.3 STREET ADDRESS<br>4.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                                            | 5.1 TITLE<br>5.2 NAME<br>5.3 STREET ADDRESS<br>5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> DELETE                                                                                            | 6.1 TITLE<br>6.2 NAME<br>6.3 STREET ADDRESS<br>6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                |

14. I do 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 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: *Gerardo Nunez* **Gerardo Nunez, President**

3/21/97

CR2E034 (9/96)