

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

FILED
Jun 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000043719 (9)

1. Corporation Name
BEWELL, INC.



Principal Place of Business

Mailing Address

9380 SW 72ND ST
STE 220-B
MIAMI FL 33173
US

9380 SW 72ND ST
STE 220-B
MIAMI FL 33173
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/22/1996

4. FEI Number

65-0683129

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, OLGA E
416 MENDOZA AVE
CORAL GABLES FL 33134

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

DELETE

NAME
NUNEZ, GERARDO
STREET ADDRESS
7331 CORAL WAY, SUITE 267-C
CITY- ST- ZIP
MIAMI FL

1.1 TITLE

Change

Addition

TITLE

S

DELETE

NAME
WILLIAMS, OLGA E
STREET ADDRESS
416 MENDOZA AVE
CITY- ST- ZIP
CORAL GABLES FL

2.1 TITLE

Change

Addition

TITLE

DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE

Change

Addition

TITLE

DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE

Change

Addition

TITLE

DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE

Change

Addition

TITLE

DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE

Change

Addition

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 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 in the attached but with an address.

CP2E034 (10/97)