

5-7-97 B-6504 C  
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May 07 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000051024 (3)

1. Corporation Name

BELLA DONNA VENTURES, INC.

Principal Place of Business

12409 BISCAYNE BLVD  
NORTH MIAMI FL 33181

Mailing Address

12409 BISCAYNE BLVD  
NORTH MIAMI FL 33181-2520

3. Date Incorporated or Qualified  
08/13/1996

3a. Date of Last Report

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

4. FEI Number

65-0681597

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAVITT, JOEL  
20801 BISCAYNE BLVD.  
5TH FLOOR  
AVENTURA FL 33180

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

TITLE D ☐ DELETE  
NAME GATTO, DANIEL H  
STREET ADDRESS 7945 EAST DRIVE NO. 301  
CITY-ST-ZIP NORTH BAY VILLAGE FL 33140

TITLE D ☐ DELETE  
NAME VELASQUEZ, JOHN  
STREET ADDRESS 3801 NE 170TH STREET  
CITY-ST-ZIP NORTH MIAMI BEACH FL 33181

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT/DIRECTOR ☒ Change ☐ Addition  
1.2 NAME DANIEL H. GATTO  
1.3 STREET ADDRESS 12409 BISCAYNE BOULEVARD  
1.4 CITY-ST-ZIP NORTH MIAMI FLA. 33181

2.1 TITLE VICE PRESIDENT/DIRECTOR ☒ Change ☐ Addition  
2.2 NAME JOHN VELASQUEZ  
2.3 STREET ADDRESS 3801 NE 170TH STREET  
2.4 CITY-ST-ZIP NORTH MIAMI BEACH FLA. 33181

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL H. GATTO

FEBRUARY 18 1997 (305)891-2355

Date

Daytime Phone #

0240929

CR2E034 (9/96)