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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

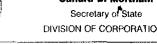
Sandra B. Mortham

FILED

Apr 07 1997 8:00am

3-11-97 6432248 Daylore Phone 4

Secretary of State



Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # P96000081128 (6) FELIX BELLO INC. Principal Place of Business Mailing Address 1971 N.W. 7 STREET 1971 N.W. 7 STREET MIAM! FL 33125 MIAMI FL 33125-3448 3. Date Incorporated or Qualified 3a. Date of Last Report 10/01/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has flability for intangible tax under s. 199.032, Yes 🖳 No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **BELLO, FELIX** 1971 N.W. 7 STREET Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33125** 83 84 Cily 85 Zip Code 11. Pursuant to the previsions 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. Lam familiar with accept the obligations of, Section 607.0505, Florida Statutes. Treystered agont and title it appointable SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6)12. 13. DELETE 1.1 TITLE Change Addition 141.5 **BELLO, FEUX** NAME 1.2 NAME 1971 N.W. 7 STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33125** 1.4 CITY-ST-ZIP CHY-St-ZIP Change DELETE TITLE 2.1 TITLE Addition NAME 2.2 NAME STHEET ADDARDS 2.3 STREET ADDRESS CUY 51-749 2.4 CITY-ST-ZIP DELETE Change Addition ThU 3.1 TITLE 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP 311Y-51-26 DELETE Addition 4.1 TITLE THILE NAME 4. 2 NAME STREET ANORESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP OFY \$1-769 DELETE 5.1 TITLE Change Addition 111.6 5.2 NAME HARM **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CHTY - \$1 - 700 DELETE 3003 61 TITLE Change Addition NAM 62 NAME **63 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP C:1Y-S1 76 14. Lea 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 path; that Lair 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 changed, or on an attachment with an address. appears in Block 12 or Block 13

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR