

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000054585

FILED  
May 03, 2005  
Secretary of State

Entity Name: LAND OF BELTS, INC.

**Current Principal Place of Business:**

8000 WEST BROWARD MALL  
UNIT KEY 304R  
PLANTATION, FL 33388

**New Principal Place of Business:**

**Current Mailing Address:**

8000 WEST BROWARD MALL  
UNIT KEY 304R  
PLANTATION, FL 33388

**New Mailing Address:**

FEI Number: 65-0760755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KING, MARK  
5353 NORTH FEDERAL HIGHWAY  
SUITE 207  
FORT LAUDERDALE, FL 33308 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GINZBURG, SHACHER  
Address: 8000 W. BROWARD MALL #304R  
City-St-Zip: PLANTATION, FL 33388 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHACHER GINZBURG

P

05/03/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date