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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000099444 1. Corporation Name

BELL'ORO INC.

Principal Place of Business

Mailing Address

WORLD JEWELRY CENTER 7500 W COMMERCIAL BLVD. BOOTH #38 FT. LAUDERDALE FL 33319

WORLD JEWELRY CENTER 7500 W COMMERCIAL BLVD. BOOTH #38 FT. LAUDERDALE FL 33319

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90198 022 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Ir corporated or Qualifed

<u>11/21/1997</u>

2. Princina	2. Principa Place of Business			2a. Mailing Address				4. FEI Number						Appl	ied For
21	7 ·			26				65-0796096						Not Applicable	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.									\$8.7	\$8.75 Additional	
22			27				5. Ce	ertifoat	te of Status	Desired			Requ		
City & S:a	te		City & S	tate				6. Fie	ection	Campaign I	Financing		\$5.	00 M	ay Be
23		28				1		and Contribu	-			ed to	, ,		
	Zip Country						untry 8.		8. This corporation owes the current year Intar			ntangible			
24	25		29		30			Personal Property Tax.				Yes	[]]No	
	9. Name and Add	ress of Current		ent	1001					nd Addres		Registere	d Agent		
	- Hame and Had				- 8	31	Name								
D'ANGELO, JERRY															
	O CLOVERFIELD CIR				82 Street Add		dress (P.O.	Box	Number is N	lot Accept	(able)				
	CA RATON FL 33433			1	83										
50.	5/1 1011 011 1 2 00 100														
					[8	84	City					F	85	Zip Co	de
				Ft :1 6: 1					. la (d .	this statem	ant for the	-	_	a ite r	nistared
11. Pursuan	t to the provisions of Se registered agent, or bot	ctions 607.0502 h. in the State of	and 607.1508, I f Florida. Such o	Horida Statu change was a	∷es, the abo nuthorized b	ove by t	-named co he corpora	tion's board	of ci	rectors. I he	reby acce	ept the app	ointment a	s regi:	stered
agent.	am familiar with, and ac	cept the obligati	ons of, Section 6	607.0505, Fk	orida Statut	es.	•								
SIGNATURE															
	Signature, typed or printed nar			(NOT		gent	signature requ	red when reinst		NOIGHANO	EC TO O	DATE	ND DIDE	CTOL	C IN 12
12.		OFFICERS AND		7 55: 575	13.			- ADL	эню	NS/CHANG	ES 10 0	FFICERS	Char		Addition
TITLE	P		i	DELETE	1.1 TITL								Cilai	ige	
NAME	D'ANGELO, JERR'				1.2 NAM	1E									
STREET ADDRE 3	7890 CLOVERFIEL	90 CLOVERFIELD CIR		1.3 STRI	EET,	ADDRESS									
CITY-ST-ZIP	BOCA RATON FL	33433			1.4 CITY	-ST	-ZIP								
TITLE			☐ DELETE	2.1 TITLE		1						Chai	nge	☐ Addition	
NAME					2.2 NAM		1								i
STREET ADORE 3	RE 3S				2.3 STF		ADDRESS								-
CITY-ST-ZIP					2.4 CIT	Y-ST	r-ZIP								
TITLE				DELETE	3.1 TITL	E		· · · · · · · · · · · · · · · · · · ·					Chai	nge	☐ Addition
NAME					3.2 NAM	Æ	1								
STREET ADDRES	s				33 STR	EET.	ADDRESS								}
CITY-ST-ZIP	-				3.4. CIT	Y-ST	r-ZIP								
TITLE				DELETE	4 1 TITL			<i>-</i>					☐ Cha	nge	Addition
NAME					4. 2 NAM	иE									
STREET ADDRESS					4.3 STR	EET	ADDRESS								
CITY-ST-ZIP					4.4 CITY										
TITLE	+			DELETE	5.1 TITL								Cha	nge	Addition
NAME					5 2 NAM										}
					53STR	EET.	ADDRESS								Ì
STREET ADDRESS	9				5.4 CITY		1								
CITY-ST-ZIP	 			DELETE	6.1 TITL		-"	·					Chai	nge	Addition
			'	ے مددد اد	6.2 NAM									J-	_ "
NAME	1						ADDRESS								
STREET ADDRES	S						ADDRESS								
CITY-ST-ZIP					6.4 CITY	r-ST	-ZIP								

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 suppliemental 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, with a 1 other like empowered.

SIGNATURE: