PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000100300

FILED Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90009 046 ***150.00

 Corporation 							
BELANG	er enterprises, inc.						
					11 86:88 (()) 86 () 86 (
	1987年,自由的自己的基础						
Principal Place	e of Business	Mailing Address		1 (10) 100 to 10 t	.,		
850 LANTANA AVE 850 LANTANA AVE							
CLEARWATER E	BEACH FL 33767	CLEARWATER BEACH FL 33	767	DO NOT WRITE IN THIS S	DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed	1700		
	•	IN Y		11/25/1997		- (
2 Principal Di	lace of Business	2a. Mailing Address	<u> </u>	4. FEI Number	Applied F	-or	
- - -	iace of business			APPLIED FOR 59-3513644	Not Appli		
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Addition	nal	
22		27		5. Certifcate of Status Desired	Fee Required		
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May B	3e	
23	•	28		Trust Fund Contribution	Added to Fees	5	
Zip	Country	Zip	Country	8. This corporation owes the current year Intar			
24	25	29	30	1 Clocker (open)	☐Yes ☐No		
	9, Name and Address of Current	Registered Agent		10. Name and Address of New Registered A	gent		
CTAR	NIEV POVANI		81 Name	WILLY ROVANITO			
	NLEY, BRYAN J Court St		82 Street Add	lress (P.O. Box Number is Not Acceptable)			
	E 200	•	27-07	D SUNTRUST HINANCIAL C	CALL		
	ARWATER FL 33756		83 401 E	AST JACKSON STREET		l	
CLL	ANWAIEN FL 33/30	,	84 City		85 Zip Code		
<u> </u>	· · · · · · · · · · · · · · · · · · ·			FL FL	13360	2.	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	l Florida. Such change was au	thorized by the corporati	poration submits this statement for the purpose of clion's board of directors. I hereby accept the appoint	ment as registere	ed	
SIGNATURE	in familia may and adopt an engage					-	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signature require				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND		1 12 Addition	
TITLE	PTD	☐ DELETE	1.1 TSTLE	_	☐ change ☐ /	Addition	
NAME	BELANGER, MICHEL	,	1.2 NAME				
STREET ADDRESS	850 LANTANA AVE		1.3 STREET ADDRESS			ì	
CITY-ST-ZIP	CLEARWATER BEACH FL 33767		1.4 CITY- ST-ZIP		□ Change □ /	Addition	
TITLE	SVP	DELETE	2.1 TITLE		☐ Change ☐ /	Addition	
NAME	BELANGER, ZULAY		2.2 NAME	•		}	
STREET ADDRESS	1		2.3 STREET ADDRESS			ļ	
CITY-ST-ZIP	CLEARWATER BEACH FL 33767		2. 4 CITY-ST-ZIP	(324,7) 7 , 12 1 2	Cloberes D	Addition	
TITLE	•	☐ DELETE	3.1 TITLE		☐ Change ☐ /	Addition	
NAME			3.2 NAME	·			
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3 4. CITY-ST-ZIP		Change C	Addition	
TITLE		☐ DELETE	4.1 TITLE		Change	Addition	
NAME	•		4. 2 NAME				
STREET ADDRESS	·		4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP	<u> </u>	Change C	Addition	
TITLE		☐ DELETE	5.1 TITLE		Change /	Augulon	
NAME			5.2 NAME	· · ·			
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP		——————————————————————————————————————	5.4 C/TY-ST-ZIP		Change C	Addition	
TITLE	[☐ DELETE	6.1 TTLE		Change /	Addition	
	ļ		0.0 5154.65				
NAME			6.2 NAME 6.3 STREET ADDRESS			İ	

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 changes, on on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #