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

CORPORATION ANNUAL REPORT

1999



Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

PROFIT FLORIDA DEPARTMENT OF STATE

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90059 026 ***150.00

DOCUMENT # P98000032451 1. Corporation Name BELL VENTURES, INC. Mailing Address Principal Place of Business 777 SO FLAGLER DR STE 900-E 777 SO FLAGLER DR STE 900-E WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/08/1998 FEI Number 59-3504011 2a. Mailing Address Applied For Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State **\$5.00** May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country Country Zip 8. This corporation owes the current year Intangible Zip □No Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SPRINKLE, PHILLIP M 82 Street Address (P.O. Box Number is Not Acceptable) 777 SO FLAGLER DR STE 900-E WEST PALM BEACH FL 33401 83 85 Zip Code 84 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. □ DELETE 1.1 TITLE Change ☐ Addition TITLE BELL, SAM 12 NAME NAME 4049 DEVLIN COURT 1.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32308-2765 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 2.1 TITLE TITLE BELL, BETH 2.2 NAME NAME **4049 DEVLIN COURT** 2.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32308-2765 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-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 of the receiver of flustee 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 ess, with all other like empowered.

CITY-ST-ZIP

RED/-10-99 OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)