## 2007 FOR PROFIT CORPORATION - ANNUAL REPORT

## Apr 16, 2007 08:00 A Secretary of State **DOCUMENT # P99000005653** 1. Entity Name BELLEAIR HOLDINGS, INC. Mailing Address Principal Place of Business 6654 78TH AVE N 6654 78TH AVE N PINELLAS PARK, FL 33781 PINELLAS PARK, FL 33781 01152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3581098 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE NOWAK, GREG A 6654 78TH AVE N PINELLAS PARK, FL 33781 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 11000000705798 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 04/24/07-80008-008 150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NOWAK, GREG A NAME 6654 78TH AVE N STREET ADDRESS PINELLAS PARK, FL 33781 CITY-ST-ZIP IIILE YEPES, CARLOS 6654 78TH AVE N STREET ADDRESS PINELLAS PARK, FL 33781 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY - ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Flonda Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or another exemptions are contained by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Nowak 4-10-0

**FILED**