

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM

VO Secretary of State

SALES ORDER #

SALESMAN

JOB #

APPROVED

DATE

DOCUMENT # S94124

1. Entity Name
BELTRAM SOUTH, INC.



Principal Place of Business

2849 FOWLER STREET
FT MYERS, FL 33901

Mailing Address

2849 FOWLER STREET
FT MYERS, FL 33901

DO NOT WRITE IN THIS SPACE



02252004 No Chg-P CR2E034 (10/03)

4. FEI Number

65-0297531

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHATLEY, JACQUELINE B
101 E. KENNEDY BLVD., SUITE 1000
TAMPA, FL 33602

**DO NOT WRITE
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)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BELTRAM, DANIEL G.
STREET ADDRESS 6800 N FLORIDA AVE
CITY- ST- ZIP TAMPA, FL

TITLE VP
NAME SKIPPER, DANNY H
STREET ADDRESS 2849 FOWLER ST.
CITY- ST- ZIP FORT MYERS, FL 33901

TITLE S
NAME POLEWASKI, XIOMARA D
STREET ADDRESS 6800 N. FLORIDA AVE.
CITY- ST- ZIP TAMPA, FL 33604

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

000000119651
04/19/04-80103-012 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daniel G. Beltram

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-2004 813-239-1136

Date

Daytime Phone #