

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90514 001 *2,100.00

DOCUMENT # J38722

1. Entity Name
KALIJE BELLE, INC.



Principal Place of Business
 4600 46TH AVE
 PO BOX 276
 CORTEZ, FL 34215

Mailing Address
 4600 46TH AVE
 PO BOX 276
 CORTEZ, FL 34215

66014710



04282006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2819958	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BELL, DOUGLAS
 8708 50 AVE W
 BRADENTON, FL 34210

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, 2006 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	BELL, WALTER T.
STREET ADDRESS	12115 45TH AVE, W
CITY-ST-ZIP	CORTEZ, FL
TITLE	V
NAME	BELL, CALVIN E.
STREET ADDRESS	12115 45TH AVE, W
CITY-ST-ZIP	CORTEZ, FL
TITLE	ST
NAME	BELL, CARL DOUGLAS
STREET ADDRESS	8708 50TH AVE, W.
CITY-ST-ZIP	BRADENTON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Walter Belle
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 29 2006

9417941249

Date

Daytime Phone #