

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000015118

1. Entity Name

HIGH CLIFF HOLDINGS, INC.

FILED

Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90004 013 ***150.00

Principal Place of Business

4612 S. OCEAN BLVD.
HIGHLAND BEACH FL 33487

Mailing Address

4612 S. OCEAN BLVD.
HIGHLAND BEACH FL 33487

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0660190

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILANI, LUCREZIA L.
4612 S. OCEAN BLVD.
HIGHLAND BEACH FL 33487

7. Name and Address of New Registered Agent

Name Camillo D. Milani

Street Address (P.O. Box Number is Not Acceptable)

4612 S. Ocean Blvd.

City Highland Beach

FL

Zip Code 33487

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.

SIGNATURE *Camillo D. Milani*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE Apr 15, 2001

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DPV ☐ Delete
NAME MILANI, LUCIA
STREET ADDRESS 44 UPLANDS AVE.
CITY-ST-ZIP THORNHILL, ONTARIO CANADA L3T-4A5

TITLE ☐ Delete
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STREET ADDRESS 44 UPLANDS AVE.
CITY-ST-ZIP THORNHILL, ONTARIO CANADA L3T-4A5

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Milani, Camillo D
STREET ADDRESS 4612 S. Ocean Blvd.
CITY-ST-ZIP Highland Beach, FL 33487

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Camillo D. Milani Apr 15, 2001 (561) 272-3303

Date

Daytime Phone #

CR2E034 (10/00)