

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002384

1. Entity Name  
DBH (BAHAMAS) INC.

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90147 048 \*\*\*550.00

Principal Place of Business  
C/O FRIEDRICH G HEINGL IMMOBILIEN  
2301 DEL PRADO BLVD., STE. 100  
CAPE CORAL FL 33990  
US

Mailing Address  
C/O BEVERLY PARYS  
1639 E. CAPE CORAL PKWY #30  
CAPE CORAL FL 33904  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
C/O Beverly Parys  
Suite, Apt. #, etc.  
1411 E. Cape Coral Pkwy  
City & State  
Cape Coral, FL  
Zip  
33904  
Country  
USA

3. Mailing Address  
C/O Beverly Parys  
Suite, Apt. #, etc.  
1411 E. Cape Coral Pkwy  
City & State  
Cape Coral, FL  
Zip  
33904  
Country  
USA

4. FEI Number NOT APPLICABLE Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

HEINDL, FRIEDRICH G  
C/O BEVERLY PARYS  
1639 E. CAPE CORAL PKWY #103  
CAPE CORAL FL 33990

## 7. Name and Address of New Registered Agent

Name C/O Beverly Parys  
Street Address (P.O. Box Number is Not Acceptable)  
1411 E. Cape Coral Pkwy  
City Cape Coral, FL Zip Code 33904

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

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

(NOTE: Registered Agent signature required when reinstating)

July 14, 2000  
DATE

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 CD  
NAME WITTMANN, HERBERT ☐ Delete  
STREET ADDRESS C/O HEINDL, 2301 DEL PRADO BLVD STE 100  
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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 CD ☒ Change ☐ Addition  
NAME WITTMANN, HERBERT  
STREET ADDRESS C/O Beverly Parys 1411 E. Cape Coral Pkwy  
CITY-ST-ZIP Cape Coral, FL 33904

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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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:

**REQUIRED**  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09.05.00

Date

(941) 541-0877

Daytime Phone #

CR2E004 (500)