

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2000 8:00 am**  
**Secretary of State**

05-05-2000 90003 011 \*\*\*150.00

DOCUMENT # F98000003967

1. Entity Name

SWISS CHALET HOLDINGS, INC.

Principal Place of Business

2385 EXEC CENTER DR  
 STE 270  
 BOCA RATON FL 33431

Mailing Address

2385 EXEC CENTER DR  
 STE 270  
 BOCA RATON FL 33431-7321

2. Principal Place of Business

~~ONE BOCA PLACE,~~  
 2255 Glades Road

3. Mailing Address

~~ONE BOCA PLACE,~~  
 2255 Glades Road

Suite, Apt. #, etc.

Ste. 324, Atrium PMB#1070

Suite, Apt. #, etc.

Ste. 324, Atrium PMB#1070

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33433

Country

USA

Zip

33433

Country

USA

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

4. FEI Number

52-1399208

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
 Fee Required

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)

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 \$150.00**  
**After MAY 1, 2000 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 CPS  
 NAME TSAMPALIEROS, GABE  
 STREET ADDRESS 2385 EXEC ENTER DR STE 270  
 CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

TITLE VV  
 NAME KANOUSE, KEITH  
 STREET ADDRESS 2385 EXEC ENTER DR STE 270  
 CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

TITLE D  
 NAME GARRY, JAMES  
 STREET ADDRESS 2385 EXEC ENTER DR STE 270  
 CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TSAMPALIEROS, GABE ☒ Change ☐ Addition  
 NAME ONE BOCA PLACE, 2255 GLADES ROAD, SUITE#  
 STREET ADDRESS 324, ATRIUM, PMB #1070, BOCA RATON, FL 33431  
 CITY-ST-ZIP

TITLE Kanouse, Keith ☒ Change ☐ Addition  
 NAME One Boca Place Keith  
 STREET ADDRESS 2255 Glades Road  
 CITY-ST-ZIP Suite#324 Atrium, PMB #1070  
 Boca Raton, FL 33431 ☒ Change ☐ Addition

TITLE Garry, James  
 NAME (address as above)  
 STREET ADDRESS  
 CITY-ST-ZIP

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

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

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

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:

*Keith J. Kanouse*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)