

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000000604

1. Entity Name

B&L GAUTHIER HOLDING COMPANY, L.L.C.

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90078 016 *****50.00

Principal Place of Business

1238 OCEAN DRIVE, SUITE 108
MIAMI BEACH FL 33139

Mailing Address

1238 OCEAN DRIVE, SUITE 108
MIAMI BEACH FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0986501

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LESMARIE, XAVIER
1238 OCEAN DRIVE, SUITE 108
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 removing)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
GAUTHIER, BERNARD
1114-6 STOS HOUSE SILVERSTED
KOWLOON HONG KONG CHINA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
GAUTHIER, LEELEE CHOW
1114-6 STOS HOUSE SILVERSTED
KOWLOON HONG KONG CHINA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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10. ADDITIONS/CHANGES

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

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)