

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000012014

1. Entity Name

BAHIA ISLE HOLDING CORP.

Principal Place of Business

2072 S. MILITARY TRL
WEST PALM BEACH FL 33415

Mailing Address

2072 S. MILITARY TRL
WEST PALM BEACH FL 33415

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite # 9

Suite, Apt. #, etc.

Suite # 9

City & State

City & State

Zip

Country

Zip

Country

4. FFL Number

65-0991383

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
941 FOURTH STREET #200
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

Don A. Paradiso

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

2072 S. Military Trail

Suite 9

City

West Palm Beach

FL

Zip Code

33415

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

Don A. Paradiso

DON A. PARADISO

01/18/01

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	D JELUM, WILLIAM GAY	2072 S. MILITARY TRL	WEST PALM BEACH FL 33415	
	P. Pres. Christian T. Chiari	98 Lake Dr. Sailfish Marina	Palm Beach Shores, FL 33404	<input type="checkbox"/> Delete
	VP Robert - Chiari	98 Lake Dr. Sailfish Marina	Palm Beach Shores, FL 33404	<input type="checkbox"/> Delete
	Tras Nicole Chiari	705 Blakely Court	Palm Beach Gardens, FL 33410	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> 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:

Christian T. Chiari

Christian T. Chiari

1/16/01 (814) 557-0027

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 19, 2001 8:00 am
Secretary of State

01-26-2001 90037 041 ***158.75

01078



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)