

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000066092

1. Entity Name

CHANIS HAUTE COUTURE, CORP.

Principal Place of Business

3703 SW 1 ST  
MIAMI FL 33134

Mailing Address

3703 SW 1 ST  
MIAMI FL 33134

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

65-1022308

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CHANIS, ENRIQUE  
27 SIDONIA AVE #1  
CORAL GABLES FL 33134

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 reinstalling)

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, 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 PD  
NAME CHANIS, ENRIQUE ☐ Delete  
STREET ADDRESS 27 SIDONIA AVE #1  
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE VD  
NAME MITCHELL, GERALDINE ☒ Delete  
STREET ADDRESS 27 SIDONIA AVE #1  
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE SD  
NAME RIOS, MICHEL ☒ Delete  
STREET ADDRESS 27 SIDONIA AVE #1  
CITY-ST-ZIP CORAL GABLES FL 33134

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

TITLE Secretary  
NAME Mitchell, Geraldine ☒ Change ☐ Addition  
STREET ADDRESS 27 Sidonia Ave. #1  
CITY-ST-ZIP Coral Gables, FL 33134

TITLE Vice-P  
NAME Anibal Cordoba ☒ Change ☐ Addition  
STREET ADDRESS 27 Sidonia Ave. #1  
CITY-ST-ZIP Coral Gables FL 33134

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 life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ENRIQUE A. CHANIS PD 02/01/01 (305) 5691665

Date

Daytime Phone #

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

03-19-2001 90067 040 \*\*\*150.00

731211



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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