

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000003911

1. Entity Name
KHEOPS GLASS ART INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90383 047 ***150.00

Principal Place of Business

**2949 RAGIS ROAD
EDGEWATER FL 32132
US**

Mailing Address

**P O BOX 213
NEW SMYRNA BEACH FL 32170-0213
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3217467**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VAILLANT, MARIE-JOSEE
2969 RAGIS ROAD
EDGEWATER FL 32132**

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 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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERNARD, GEORGES 2949 RAGIS RD EDGEWATER FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VAILLANT, MELANIE 585 RANG 8 HAM-NORD P	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VAILLANT, MARIE-JOSEE 2969 RAGIS RD EDGEWATER FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GAGNE, H. SARAH 2949 RAGIS RD. EDGEWATER FL 32132	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FOREST, PIERRE 2949 RAGIS RD. EDGEWATER FL 32132	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Leblanc, Benoit 2969 Ragis Rd Edgewater, FL 32132	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Treasurer Vaillant, Melanie 2969 Ragis Rd Edgewater, FL 32132	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Gagné, Sarah H.	☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marie-Joe Vaillant
Date **Apr 20, 2001** Daytime Phone # **(386) 428-5620**

CR2E034 (10/00)