

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000040314

1. Entity Name

NORTH BAY POWER MANAGEMENT, INC.

Principal Place of Business

340 ROYAL POINCIANA WAY
STE 316
PALM BEACH FL 33480

Mailing Address

340 ROYAL POINCIANA WAY
STE 316
PALM BEACH FL 33480

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 65-0498104

Applied For
Not Applicable

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

FRIEDMAN, HARRY J P.A.
200 SOUTH BISCAYNE BLVD.
SUITE 4000
MIAMI FL 33131-2398

Name

Armando A. Tabernilla

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

340 Royal Poinciana Way, Suite 316

City

Palm Beach

FL

Zip Code
33480

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  Armando A. Tabernilla, VP

2/9/01

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

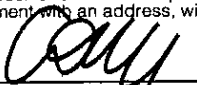
11. OFFICERS AND DIRECTORS

TITLE	VTAS	<input type="checkbox"/> Delete
NAME	BLOMQUIST, ERIK J	
STREET ADDRESS	340 ROYAL POINCIANA WAY, STE 316	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	EV	<input type="checkbox"/> Delete
NAME	CARSON, DONALD W	
STREET ADDRESS	340 ROYAL POINCIANA WAY, STE 316	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	VAS	<input type="checkbox"/> Delete
NAME	CEPERO, GUSTAVO R	
STREET ADDRESS	340 ROYAL POINCIANA WAY, STE 316	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	DOMINICIS, JORGE A	
STREET ADDRESS	340 ROYAL POINCIANA WAY, STE 316	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	FANJUL, ALEXANDER L	
STREET ADDRESS	340 ROYAL POINCIANA WAY, STE 316	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	CD	<input checked="" type="checkbox"/> Delete
NAME	FANJUL, ALFONSO	
STREET ADDRESS	340 ROYAL POINCIANA WAY, STE 316	
CITY-ST-ZIP	PALM BEACH FL 33480	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VI	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DVS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tabernilla, Armando A.	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 like empowered.

SIGNATURE:  Armando A. Tabernilla, VP 2/9/01 561-655-6303

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)