## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P96000018483 1. Entity Name CALAIS, INC. Principal Place of Business Mailing Address 7552 BUCCANEER AVENUE 7552 BUCCANEER AVENUE NORTH BAY VILLAGE FL 33141-4112 NORTH BAY VILLAGE FL 33141 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country 6. Name and Address of Current Registered Agent Name

**AMERILAWYER CHARTERED** 

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

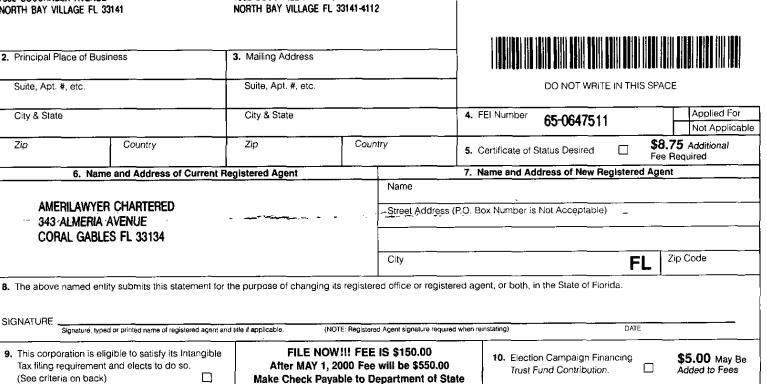
Signature, typed or printed name of registered agent and title if applicable.

343 ALMERIA AVENUE CORAL GABLES FL 33134

SIGNATURE

## FILED Mar 09, 2000 8:00 am **Secretary of State**

03-09-2000 90100 049 \*\*\*150.00



11.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MARTINEZ, JAVIER R 7552 BUCCANEER AVENUE NORTH BAY VILLAGE FL 33141	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi	GRZE034 (9/99)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RUIZ, LUCINA L 7552 BUCCANEER AVENUE NORTH BAY VILLAGE FL 33141	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi	tion
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VANOY, SONIA M 7552 BUCCANEER AVENUE _NORTH BAY VILLAGE FL 33141	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2IP	☐ Change ☐ Addi	tion
, TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi	tion
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addi	tion

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

13. I hereby certify that the information supplied with this filling 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.

JAVIER R. Martinez 01/29/2000 (303) 710 44 49