

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000027308

1. Entity Name

BARGATE HOLDINGS, INC.

Principal Place of Business

2875 NE 191ST ST STE 404
NO MIAMI BEACH FL 33180

Mailing Address

2875 NE 191ST ST STE 404
NO MIAMI BEACH FL 33180

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0664767

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REINHARD, SANFORD N
2875 NE 191ST ST STE 404
NO MIAMI BEACH FL 33180

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 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 PD
NAME GOLDLIST, ISADORE ☒ Delete
STREET ADDRESS 12 GOLDFINCH COURT
CITY-ST-ZIP WILLOWDALE ON M2R 2C3

TITLE VPS
NAME GOLDLIST, HARRY ☒ Delete
STREET ADDRESS 12 GOLDFINCH COURT
CITY-ST-ZIP WILLOWDALE ON M2R 2C3

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 President ☒ Change ☐ Addition
NAME Barry Joseph Goldlist
STREET ADDRESS 19 Carnwath Crescent
CITY-ST-ZIP Toronto, Ontario M2P 1J4

TITLE Secretary ☒ Change ☐ Addition
NAME Gerold Goldlist
STREET ADDRESS 139 Strathearn Road
CITY-ST-ZIP Toronto, Ontario M6C 1R7

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

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 like empowered.

SIGNATURE:

Gerold Goldlist
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Gerold Goldlist, Secretary

Jun 21 / 01 (416) 658-1861
Date Daytime Phone #

CR2E034 (10/00)

FILED
Apr 23, 2001 8:00 am
Secretary of State
04-23-2001 90131 001 *5,100.00



DO NOT WRITE IN THIS SPACE