

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000033809

1. Entity Name
SWISS-FLORIDA INVESTMENTS, INC.

FILED
Apr 12, 2001 8:00 am
Secretary of State

04-12-2001 90040 044 ***150.00

Principal Place of Business
879-B MIRAMAR ST
CAPE CORAL FL 33904

Mailing Address
557 6TH AVE N
SAINT PETERSBURG FL 33701

527456



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
557 6th Ave N
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
St. Petersburg
Zip
33701

City & State
Country

4. FEI Number 65-0761979
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DESBAILLETS, ANETTE
557 6TH AVE N
SAINT PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name Anette Kendall
Street Address (P.O. Box Number is Not Acceptable)
557 6th Ave N
City St. Petersburg FL Zip Code 33701

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.

Anette Kendall
4-20-01
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	PVTS	<input type="checkbox"/> Delete
NAME	DESBAILLETS, ANETTE	
STREET ADDRESS	557 6TH AVE N	
CITY-ST-ZIP	SAINT PETERSBURG FL 33701	
TITLE	D	<input type="checkbox"/> Delete
NAME	DESBAILLETS, ANETTE	
STREET ADDRESS	557 6TH AVENUE	
CITY-ST-ZIP	SAINT PETERSBURG FL 33701	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PVTS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kendall, Anette	
STREET ADDRESS	same	
CITY-ST-ZIP	same	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kendall, Anette	
STREET ADDRESS	same	
CITY-ST-ZIP	same	
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		
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anette Kendall, President
4-20-01 727 822 8571

CR2E034 (10/00)