

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90039 046 ***150.00

DOCUMENT # **P97000097991** ✓

1. Entity Name

Beach Island Imports, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

53 Carol Drive

Suite, Apt. #, etc.

3. Mailing Address

405 Piney Point Rd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Freeport, FL

City & State

Freeport, FL

4. FSI Number

59-3473013

Applied For

Not Applicable

Zip

32439

Country

Walton

Zip

32439

Country

Walton

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Chano M. Craig Price

Street Address P.O. Box Number is Not Accepted

405 Piney Point Road

City

Freeport

FL

Zip Code

32439

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

Chano M. Craig Price

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

(NOTE: Registered Agent signature required when reinstating)

4-30-2002

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25**

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
NAME
STREET ADDRESS
CITY- ST- ZIP
**PT.
Chano M. Craig Price
405 Piney Point Road
Freeport, FL 32439**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VS David M. Price
405 Piney Point Rd
Freeport, FL 32439**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Chano M. Craig Price President

4-30-02 8500355234

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)