

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000040421

1. Entity Name

BOUGAINVILLEA INCORPORATED

Principal Place of Business

Mailing Address

AMANDARI, 6 VIA PARIGI
PALM BEACH FL 33480

AMANDARI, 6 VIA PARIGI
PALM BEACH FL 33480

2. Principal Place of Business

Walker Lansing

Suite, Apt. #, etc.

6 VIA PARIGI

City & State

Palm Beach, FL

Zip
33480

Country

U.S.A.

3. Mailing Address

WALKER LANSING

Suite, Apt. #, etc.

6 VIA PARIGI

City & State

Palm Beach FL

Zip

33480

Country

U.S.A.

FILED
Jan 16, 2001 8:00 am
Secretary of State

01-16-2001 90075 033 ***150.00

C0004467



DO NOT WRITE IN THIS SPACE

4. FEI Number 22-3617386

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZABRISKIE, JOHN
AMANDARI, 6 VIA PARIGI
PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name

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

WALKER LANSING

6 VIA PARIGI

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

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 D ☐ Delete
NAME ZABRISKIE, JOHN
STREET ADDRESS 9 ACADEMY STREET
CITY-ST-ZIP SALISBURY CT 06068

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME John Zabriskie
STREET ADDRESS 6 VIA PARIGI
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/00

Date

561-651-7412

Daytime Phone #

CR2E034 (10/00)

0624148