

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90094 006 ***150.00

DOCUMENT # P99000072346

1. Entity Name

BACCARAT ANTIQUES, INC.



Handwritten initials

Principal Place of Business

9960 S OCEAN DRIVE
PENTHOUSE 4
JENSEN BEACH FL 34957

Mailing Address

9960 S OCEAN DRIVE
PENTHOUSE 4
JENSEN BEACH FL 34957

00011001



DO NOT WRITE IN THIS SPACE

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

650947497

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ABRAMSON, EDWARD J
7270 NW 12TH STREET
STE 580
MIAMI FL 33126

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 \$550.00

After SEPTEMBER 13, 2000 Min. will be \$750.00
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	<input type="checkbox"/> Delete
NAME	CIARLO, BERNARDO E	
STREET ADDRESS	9960 S OCEAN DRIVE	
CITY-ST-ZIP	JENSEN BEACH FL 34957	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	CIARLO, LEANDRO N	
STREET ADDRESS	9960 S OCEAN DRIVE	
CITY-ST-ZIP	JENSEN BEACH FL 34957	
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		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/26/00

Date

730518678915

Daytime Phone #

CR2E034 (5/00)

Attachment
#P990000072346
DUJ7397

2000 UNIFORM BUSINESS REPORT (UBR)

Attachment

P99000072346
0007346

DOCUMENT # P99000072346

1. Entity Name

LOCARAT ANTIQUES, INC.

2. Principal Place of Business

3960 S OCEAN DRIVE
PENTHOUSE 4
JENSEN BEACH FL 34957

Mailing Address

9960 S OCEAN DRIVE
PENTHOUSE 4
JENSEN BEACH FL 34957-2459



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

State, Act, P, etc.

State, Act, P, etc.

City & State

City & State

4. FEI Number

650947497

Applied For

☒ Not Applicable

5. Certificate of Status Desired

\$3.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ABRAMSON, EDWARD J
7210 NW 12TH STREET
STE 580
MIAMI FL 33126

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 his title (if applicable)

(NOTE: Registered Agent Signature Required When Transferring)

DATE

9. This corporation is eligible to satisfy its intangible
taxing requirement and elects to do so
(See criteria on back)

FILE NOW!! FEE IS \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If 11)

NAME	TITLE	STREET ADDRESS	CITY-STATE-ZIP	NAME	TITLE	STREET ADDRESS	CITY-STATE-ZIP
PD CIARLO, BERNARDO E	<input type="checkbox"/> Delete	9960 S OCEAN DRIVE	JENSEN BEACH FL 34957				
VD CIARLO, LEANDRO N	<input checked="" type="checkbox"/> Delete	9960 S OCEAN DRIVE	JENSEN BEACH FL 34957				
	<input type="checkbox"/> Delete						
	<input type="checkbox"/> Delete						
	<input type="checkbox"/> Delete						
	<input type="checkbox"/> Delete						
	<input type="checkbox"/> Delete						
	<input type="checkbox"/> Delete						

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 13.00(1), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath by an officer or director of the corporation. I am authorized to execute this report as required by Florida Statutes, and that my name appears in Block 11 or Block 12 of this report.

2/14/20

1561319-6335

Division of Corporations
Florida Department of State
Tallahassee, FL

Attachment
#P990000 72348
DW77391

Miami, July 28, 2000

To whom it may concern,

Back in February I sent you the 2000 Uniform Business Report, previously signed and filled out, plus a check in the amount of U\$ 150.00. For some reason that check was never cleared by you. Therefore I got a new UBR form stating that I should send it back to you along with U\$ 550.00

Considering that I did send the original form and the check on time, and according to the suggestion of someone at your division, is that I please ask you to waive the late fee.

Thanks, sincerely,

Bernardo Ciarlo
Baccarat Inc
(Former Baccarat Antiques, Inc.)