

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90096 025 ***150.00

DOCUMENT # V05995

1. Entity Name

BASA INVESTMENT, INC.

Principal Place of Business

**9628 PEARSON RD.
 HARRISON TN 37341
 US**

Mailing Address

**6830 LEE HWY
 CHATTANOOGA TN 37421-2444
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0305434

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**QUINTERO, FRANK JR P.A.
 818 PONCE DE LEON BLVD.
 CORAL GABLES FL 33134**

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, 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 IN 11

TITLE **P**
 NAME **BASADRE JR, FRANCISCO**
 STREET ADDRESS **9626 PEARSON RD.**
 CITY-ST-ZIP **OOTEWAH TN**

☐ Delete

TITLE **ST**
 NAME **BASADRE, HELENA**
 STREET ADDRESS **9626 PEARSON RD.**
 CITY-ST-ZIP **OOTEWAH TN**

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TITLE **STD**
 NAME **BASADRE, LOURDES**
 STREET ADDRESS **11405 SW 32 ST**
 CITY-ST-ZIP **MIAMI FL**

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 CITY-ST-ZIP

☐ Change ☐ Addition

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:

Francisco Basadre Jr
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

378-00

Date

Daytime Phone #

CR2E034 (9/99)