

2002 UNIFORM BUSINESS REPORT (UBR)

0012864 AT

DOCUMENT # A98000002803

1. Entity Name
LANTANA VENTURE, LTD.

FILED
02 APR 30 PM 3: 31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

75 NORTHEAST 6TH AVENUE, SUITE 214 **75 NORTHEAST 6TH AVENUE, SUITE 214**
DELRAY BEACH FL 33483 **DELRAY BEACH FL 33483**



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DUE BY MAY 1, 2002

4. FEI Number Applied For

65-0886004 Not Applicable

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

6. Name and Address of Current Registered Agent

ZENGAGE, JIM
75 NORTHEAST 6TH AVENUE, SUITE 214
DELRAY BEACH FL 33483

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

9. Capital Contributions as Shown on record. **\$500,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **1,000.00**

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	P97000073252
NAME	RETAIL CONCEPTS, INC.
STREET ADDRESS	75 NORTHEAST 6TH AVENUE, SUITE 214
CITY-ST-ZIP	DELRAY BEACH FL 33483
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	400005503014--8
CITY-ST-ZIP	-05/10/02--01057--007
STREET ADDRESS	****150.00 ****150.00
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **Jim Zengage, President**
Retail Concepts Inc. Date: **4/24/2002** Daytime Phone #: **562783100**

CR2E003 (9/01)