

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # H89669****1. Entity Name**
11 CORPORATION, INC.**FILED**
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90019 019 ***150.00

Principal Place of Business
330 SOUTHERN BLVD.
WEST PALM BEACH FL 33405**Mailing Address**
330 SOUTHERN BLVD.
WEST PALM BEACH FL 33405**80072792**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2656551**

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****MARTENS, RICHARD L.**
515 N. FLAGLER DR.
19TH FLOOR
WEST PALM BEACH FL 33401

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** ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PULTS, LEON CARL 6604 EASTVIEW DR LANTANA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PULTS, GALE ANDREA 6604 EASTVIEW DR LANTANA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:****SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

081500 Attachment
D#H89669 2 of 2
A0072792

FLANIGAN'S



ENTERPRISES, INC.

DO NOT REMOVE!

July 13, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Document # V72785- Galeon Tavern, Inc.

Gentlemen:

Enclosed is copy of our April 24, 2000 letter where the annual fee of One Hundred Fifty Dollars (\$150.) was paid. With the letter we requested a uniform business report as the corporation had not received one as of that date.

In checking our records the check for One Hundred Fifty Dollars (\$150.) has not been cashed.

Enclosed is the completed form which you recently sent to us. Since the payment was made on a timely basis we trust that the One Hundred Fifty Dollars (\$150.) which was remitted on April 24, 2000 will suffice as a payment in full for the annual filing.

Very truly yours,
FLANIGAN'S ENTERPRISES, INC.

Edward A. Doxey
Chief Financial Officer & Secretary

Enclosure (as stated)

EAD/ck

Cc: Leon Pults

081500 1189669
APR 27 1992
FLANIGAN'S



COPY

ENTERPRISES, INC.

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

April 24, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

REF: Document #V72785 - Galeon Tavern, Inc.

Please find enclosed our check in the amount of \$150.00 in payment of the "Profit Corporation Annual Report". The Corporation has not received the form for the current year.

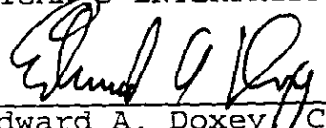
Please credit the Corporation's account for the payment and forward us a form so we may return it with the appropriate signatures.

Thank you for your attention to this matter.

Sincerely,

FLANIGAN'S ENTERPRISES, INC.

By


Edward A. Doxey, CPA
C.F.O. and Secretary

ead:sk
ENCLS: