LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L00000014650

BROADWAY PALM DINNER THEATER WEST, LLC

FILED May 12, 2002 8:00 am Secretary of State 05-12-2002 90609 026 ****50.00

	DO N	NOT WRITE	IN THIS S	PAC	E.			×.	}5	8325
2. Principal Place of Business			3. Mailing Address	<u> 200 A. A.</u>	<u> </u>					
1380	COLONIA	AL BLVD.		1380 COLONIAL BLVD.						
Suite, Apt. #, etc.			Suite, Apt. #, etc.	. <u>V</u>			DO NOT WRITE IN THIS SPACE			
City & S	date		0							
FORT	FORT MYERS, FL		City & State FORT MYERS, FL				64-1057794			Applied For
Zip		Country	Zip	Country			07 103//34		Not Applicable	
33907	7	USA	33907	USA			5. Certificate of Status Desired 55.00 Additional Fee Required			
	57 A 18 A 1			1978		7.	. Name and Address of Current Registered Agent			
: ::		A NOT W			Name PRATHE		/ILLIAM T.			
		O-NOT-W	KIIE -	- الشخوات	Street Addi	ress (P.0	O. Box Number is Not Accountable)			
- 1		N THIS SP	ΔCE		1380 C	<u>OLÒN</u>	HAL BLVD			
•				344						
3	10.0				OKT M		· · · · · · · · · · · · · · · · · · ·		Zin	Code
8. The abov	e named entity	v Submits this statement for	The second of the second	36.5 C. F	UK I M	YERS	agent, or both, in the State of Florid	FL	L	^{Code} 33907
itti (17.) Gerran	Standard.	or printed name of registered agent a	Make Check Pa	EE IS \$5 yable to I UE BY M	Departmei	nt of S	tate	DATE		
9.	Tuo -	MANAGING MEMBER	S/MANAGERS	专业等		tus.		\$100 c 61	Cran Carlo	THE WAR THE PROPERTY OF THE SEC.
	MGR PRATHER 1380 CC FORT MY	R, WILLIAM T. DLONIAL BLVD. 'ERS, FL 3390		TITLE NAME STREET A CITY-ST	DORESS					
FITLE NAME STREET ADDRESS CITY-ST-ZIP				NAME STREET A	ODRESS					
VAME STREET ADDRESS CITY-ST-ZIP		and the same of th	e de la companya de l	NAME STREET AL CITY-ST-	Carlo Ca		DO NOT W	RIT		
TTLE NAME TREET ADDRESS TTY-ST-ZIP				NAME STREET AD CITY ST. Z	DRESS .		IN THIS SE	ALL SALES	ac us s	
ITLE IAME TREET ADDRESS ITY-ST-ZIP		·		NAME SIREET AD CITY-SI-Z	San Creat Lines					
AME	de la companya de la	Parente por sympacial		NAME STREET ADD	XESS P					
I hereby control indicated to limited liab	ertify that the in on this report is billity company	nformation supplied with this true and accurate and that of the receiver or trustee er	is filing does not qualify for that my signature shall have the mpowered to execute this rep	e exemptio	n stated in	Section if made apter 60	119.07(3)(i), Florida Statutes. I furth under oath; that I am a managing n 08, Florida Statutes.	er certify thember or	hat the mana	e information ger of the

14-30-02