

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 JAN 31 PM 1:34

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P00000039582*

1. Entity Name

TILT TIME, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2501 SW 71 TERR

3. Mailing Address

2501 SW 71 TERR

Suite, Apt. #, etc.

UNIT # 112

Suite, Apt. #, etc.

UNIT # 112

City & State

DAVIE

City & State

DAVIE

Zip

33317

Country

BROWARD

Zip

33317

Country

BROWARD

800013270738

*02/28/03--01045--010 **450.00*

2001-2003 UBR

4. FEI Number

65-0998245

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name *LOUIS HOWARD LATHAN JR.*

Street Address (P.O. Box Number is Not Acceptable)

2501 SW 71 TERR UNIT # 112

City *DAVIE*

FL

Zip Code *33317*

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

X Louis Howard Lathan Jr.

Signature of officer or director of the corporation or registered agent and title if applicable.

(NOTE: Registered Agent signature required when remaining)

DATE

1-21-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE *DIRECTOR / REGISTERED AGENT*
NAME *LOUIS HOWARD LATHAN JR.*
STREET ADDRESS *2501 SW 71 TERR UNIT # 112*
CITY-ST-ZIP *DAVIE, FL 33317*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE *DIRECTOR*
NAME *REBECCA H. LATHAN*
STREET ADDRESS *2501 SW 71 TERR UNIT # 112*
CITY-ST-ZIP *DAVIE, FL 33317*

TITLE
NAME
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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *X Louis Howard Lathan Jr.*

Louis Howard Lathan Jr.

LOUIS HOWARD LATHAN JR.

1-21-03

954-732-6548

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034B (12/02)

282

TILT TIME, INC.

January 21, 2003

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

To Whom It May Concern:

Please be advised that I never received a notice of renewal and would, therefore, like to renew my corporation without any penalties.

Attached please find the notice of renewal with changes along with the fee payable to the Department of State.

If there are any questions, please contact me at (954) 922-1816.

Yours truly,

X 
LOUIS HOWARD LATHAN JR.