2002 UNIFORM BUSINESS REPORT (UBR)

Jun 13, 2002 8:00 am Secretary of State P00000043929 **DOCUMENT #** 06-13-2002 90384 017 ***150.00 1. Entity Name PROMO-TEL. INC. Principal Place of Business Mailing Address 417 8TH ST WEST 1401 MANATEE AVENUE WEST BRADENTON FL 34205 #800 **BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address 1401 Manatee Ave. West Suite, Apt. #, etc Suite 800 Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE -City & State-City & State 4. FEI Number Applied For Bradenton FL 65:1009204 Not Applicable Zip 34205 Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HENKE, DONALD Street Address (P.O. Box Number is Not Acceptable) **CARLTON FIELDS** 777-S HARBOR ISLAND BLVD -TAMPA FL 33602-5799 City Zip Code F 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 egent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filling requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 - (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE ☐ Delete TITLE (<u>8</u> Change : " Addition NAME BOUDROT, DEBRA A NAME 1401 MANATEE AVENUE WEST, #800 STREET ADDRESS STREET ADDRESS CITY-ST-7IP BRADENTON FL 34205-6770 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TILE ☐ Change Addition MANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME_ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TMF ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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 eath; that I am an officer or director of the corporation or the receiver or distance 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.

REQUIRED

SIGNATURE:

FILED

941-748 1373



Katherine Harris Secretary of State

June 3, 2002

THE SOUTHBRIDGE RESTAURANT COMPANY, INC. 6101 MIDNIGHT PASS ROAD SARASOTA, FL 34242

Subject: THE SOUTHBRIDGE RESTAURANT COMPANY

Reference Number: - -000000715496

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Due to the volume of mail received in this office both the annual report/uniform business report and the filing fee must be received by our office together in order to be processed.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

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