

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 22, 2001 8:00 am**  
**Secretary of State**

03-27-2001 90025 021 \*\*\*150.00

**DOCUMENT # P00000049820**

1. Entity Name

**T & J LOUNGE, INC.**

**LA**

Principal Place of Business

**8961 TAFT ST.  
 PEMBROKE PINES FL 33024**

Mailing Address

**8961 TAFT ST.  
 PEMBROKE PINES FL 33024**

**777 4 U**



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. FEL Number

**59-1912064**

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

**GREEN, RONNI SUE ESQ.  
 9000 W. SHERIDAN STE., STE. 115  
 PEMBROKE PINES FL 33024**

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 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete  
 NAME **SODL, TONY**  
 STREET ADDRESS **12650 SW 6TH ST., K-102**  
 CITY-ST-ZIP **PEMBROKE PINES FL 33027**

TITLE **DIS/IT/D** ☒ Change ☐ Addition  
 NAME **JACQUELINE DEFRISCO**  
 STREET ADDRESS **8961 TAFT STREET**  
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

**8-20-01** **954-436-3915**  
 Date Daytime Phone #

CR2E034 (5/01)

Attachment Doc # P00000049800  
77740

T & J Lounge  
8861 Tenth Street  
Pembroke Pines  
FL 33024

DEPARTMENT OF STATE  
FOR DEPOSIT ONLY  
ACCT.# 1009068796

MAR 26 2001

2111 99 514

BANK OF AMERICA NY  
MAC00000014 E4102 90 P02  
03/27/01

604024010

200144552

77740

PAY TO THE ORDER OF Department of State

ONE HUNDRED FIFTY DOLLARS \$ 150<sup>00</sup>/100

DATE 3-20-01

CUSTOM BUSINESS BANKING

First Union National Bank  
Washington, DC  
RIT 067006432

FOR 59-192064 FEIN Anthony J. Bell

#000582 #0000015000

516980 0582

63-643670  
BRANCH 0444