

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2001 8:00 am
Secretary of State

05-05-2001 90825 043 ***150.00

0317781

DOCUMENT # P00000080964

1. Entity Name

R & V LIQUORS AND LOUNGE, INC.

Principal Place of Business

Mailing Address

**129 NORTH FEDERAL HIGHWAY
 LAKE WORTH FL 33460**

**129 NORTH FEDERAL HIGHWAY
 LAKE WORTH FL 33460**

2. Principal Place of Business

129 N. Federal Hwy

3. Mailing Address

Suite, Apt. #, etc.

City & State

Lk Worth FL

City & State

Suite, Apt. #, etc.

Zip

33460

Country

Palm Beach

Zip

Country

City & State

Suite, Apt. #, etc.

4. FEI Number

65-1034677

Applied For

Not Applicable

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

**RICHARDS, FRANKLIN T
 4132 POT O GOLD STREET
 WEST PALM BEACH FL 33406-3912**

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 \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 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 ☐ Delete
 NAME **D**
 STREET ADDRESS **RICHARDS, FRANKLIN T**
 CITY-ST-ZIP **4132 POT O GOLD STREET
 WEST PALM BEACH FL 33406-3912**

TITLE ☒ Change ☐ Addition
 NAME **S/T**
 STREET ADDRESS **Richards, Franklin T**
 CITY-ST-ZIP **4132 Pot o Gold St
 West Palm Beach, FL 33406**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **P**
 STREET ADDRESS **Charles Jay Vogler**
 CITY-ST-ZIP **4132 Pot o Gold St
 West Palm Beach FL 33406**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

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:

Franklin T Richards

Franklin T Richards

4/23/01

5615823232

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)