

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90101 046 ***150.00

DOCUMENT # P00000083744

1. Entity Name

LAST MINUTE ENTERTAINMENT INC

Principal Place of Business

20822 SAN SIMEON WAY APT #102
MIAMI FL 33179

Mailing Address

20822 SAN SIMEON WAY APT #102
MIAMI FL 33179

2. Principal Place of Business

850 IVES DAIRY RD

3. Mailing Address

850 IVES DAIRY RD.

Suite, Apt. #, etc.

712

Suite, Apt. #, etc.

712

City & State

MIAMI BEACH FLORIDA

City & State

MIAMI BEACH FLORIDA

Zip

33179

Country

USA

Zip

33179

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1038761

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

AKPOREHE, BARNABAS

20822 SAN SIMEON WAY APT #102

MIAMI FL 33179

7. Name and Address of New Registered Agent

Name **BARNABAS AKPOREHE**

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

850 IVES DAIRY ROAD #712

City

MIAMI BEACH

FL

Zip Code

33179

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

Barnabas Akporehe
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/13/2002

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, 2002 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

TITLE **D** ☐ Delete
 NAME **AKPOREHE, BARNABAS**
 STREET ADDRESS **20822 SAN SIMEON WAY APT #102**
 CITY-ST-ZIP **MIAMI FL 33179**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Change ☐ Addition
 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:

Barnabas Akporehe
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 654 0377 04/13/2002

CR2E034 (9/01)