

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91180 004 ***158.75

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DOCUMENT # P02000049518

1. Entity Name
A BARTENDERS ACADEMY OF PALM BEACH, INC



Principal Place of Business
**630 S. SAPODILLA AVENUE
SUITE 415
WEST PALM BEACH FL 33401**

Mailing Address
**630 S. SAPODILLA AVENUE
SUITE 415
WEST PALM BEACH FL 33401**



2. Principal Place of Business
**1465 Palm Beach Lakes Blvd
Suite, Apt. #, etc. Suite 805**

3. Mailing Address
Same

City & State
West Palm Beach FL

City & State
West Palm Beach FL

Zip
33401

Country

4. FEI Number
75-3053447

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**STRONG, BRETT
5185 CHELAN COVE
LAKE WORTH FL 33467**

7. Name and Address of New Registered Agent


Name
Philip N. Radomski

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

City
West Palm Beach FL

Zip Code
33401

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  **Philip N. Radomski** DATE **5/1/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete STRONG, BRETT 5185 CHELAN COVE LAKE WORTH FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete RADOMSKI, WAYNE 630 S. SAPODILLA AVENUE #415 WEST PALM BEACH FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete RADOMSKI, PHILIP 630 S. SAPODILLA AVENUE #415 WEST PALM BEACH FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete STRONG, AGGIE 630 S. SAPODILLA AVENUE #415 WEST PALM BEACH FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Philip Radomski** DATE **5/1/03** (561) 832-5848

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)