## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 27, 2001 8:00 am Secretary of State DOCUMENT # P9200000029 1. Entity Name NATIONAL ASSOCIATION OF BAR & TAVERN OWNERS, INC 04-27-2001 90235 018 \*\*\*150.00 Principal Place of Business Mailing Address 4519 N.E. 22ND ROAD P O BOX 11578 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33339 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0377785 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired [7 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JETT, BRENT W Street Address (P.O. Box Number is Not Acceptable) 4519 N.E. 22ND ROAD FT. LAUDERDALE FL 33308 City Zio 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, typod or or med name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstaling) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fae will be \$650.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. THE CBD ☐ Change ☐ Dalete NAME JETT, BRENT W NAME STREET ADDRESS 4519 N.E. 22ND RD STREET ADDRESS CITY-ST-ZIP CITY-ST-Z:P FT. LAUDERDALE FL TITLE ☐ Delete 71719 ☐ Addition NAME JETT, RICHARD NAME STREET ADDRESS 4519 N.E. 22ND RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 000 PD ☐ Delete TITLE Addition NAME JETT, DAVID NAME STREET ADDRESS 4519 NE 22 ROAD STREET ADDRESS CITY - ST - ZIP CITY-S1-ZIP FT. LAUDERDALE FL DS TITLE ☐ Delete TITLE Change | ☐ Addition NAME JOHNSON, DUDLEY E NAME STREE: ADDRESS 4519 NE 22 ROAD STREET ADDRESS CITY-ST-ZIP OLSY - ST - ZIP FT. LAUDERDALE FL TITLE Delete TITLE Change Addition SAME NAME STREET ADDRESS STREET ADDRESS

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 oath; that I am an officer or director of the corporation or the receiver or furstee 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

THE

NAME

☐ Delete

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-7IP

STREET ADDRESS

CITY-ST-7IP

TITLE

MAME

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■ Addition