

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000039116

1. Entity Name

ROADHOUSE GRILL NORTH MIAMI, INC.

FILED
Feb 13, 2000 8:00 am
Secretary of State

02-13-2000 90017 045 ***150.00

Principal Place of Business

Mailing Address

6600 N. ANDREWS AVENUE, SUITE #160
FT. LAUDERDALE FL 33309

6600 N. ANDREWS AVENUE, SUITE #160
FT. LAUDERDALE FL 33309-2188

2. Principal Place of Business

2703-A Gateway Drive
Suite, Apt. #, etc.

3. Mailing Address

2703-A Gateway Drive
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach, FL

City & State

Pompano Beach, FL

4. FEI Number

65-0419160-
65-0473222

Applied For

Not Applicable

Zip

33069

Country

USA

Zip

33069

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERNHOLZ, MARTIN
6600 N ANDREWS AVE
SUITE 160
FT. LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name
Martin Bernholz
Street Address (P.O. Box Number is Not Acceptable)
2703-A Gateway Drive
City
Pompano Beach FL Zip Code
33069

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
AND MAY 1, 2000 Fee will be \$350.00
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 NAME STREET ADDRESS CITY-ST-ZIP	CFO GLASSHAGEL, GLENN 6600 N. ANDREWS AVENUE, SUITE #160 FT. LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SABI, AYMAN 6600 N ANDREWS, SUITE 160 FT. LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RATNER, PHIL 3001 E PRES. GEORGE BUSH HWY #200 RICHARDSON TX 75082	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIEDMAN, PHIL 400 LEGACY PARK DR SUITE B RIDGELAND MS 39157	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TON, VINCENT 6600 N ANDREWS AVE SUITE 160 FORT LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, ALOIN 6600 N ANDREWS AVE SUITE 160 FORT LAUDERDALE FL 33309	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President + CFO 2703-A Gateway Drive Pompano Beach, FL 33069	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President + CEO 2703-A Gateway Drive Pompano Beach FL 33069	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman of the Board Tan, Vincent 2703-A Gateway Drive Pompano Beach, FL 33069	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Alain Lee 2703-A Gateway Drive Pompano Beach, FL 33069	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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]
Signature and Typed or Printed Name of Signing Officer or Director
Ayman Sabi, President + CEO

1/27/00

Date

(954) 957-2600

Daytime Phone #

CR2E034 (9/99)