

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 04, 2002 8:00 am
Secretary of State

08-04-2002 90158 011 ***550.00

DOCUMENT # P93000076100

1. Entity Name

Tina's Beer City, Inc. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
221 Center Street

3. Mailing Address
221 Center Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Jupiter, Florida

City & State
Jupiter, Florida

4. FEI Number
65-0446568

Applied For
Not Applicable

Zip
33458

Country

Zip
33458

Country

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

7. Name and Address of Current Registered Agent

Name
Christina Coleman

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

City
Jupiter FL Zip Code
334589

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
Christina Coleman, Director
100 Norwood Rd.
Jupiter, FL 33458

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Helga Dooling, Director
100 Norwood Rd.
Jupiter, FL 33458

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CITY-ST-ZIP

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(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 and 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/30/02

Date

Daytime Phone #

CR2E034B (12/01)