

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

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90704 018 ***150.00

DOCUMENT # P93000086788

1. Entity Name:

LT'S SPORTS BAR & GRILL INC.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:

4645 GUN CLUB RD

3. Mailing Address:

4645 GUN CLUB RD

Suite, Apt. #, etc.

A-2

Suite, Apt. #, etc.

A-2

City & State

WEST PALM BEACH FL

City & State

WEST PALM BEACH FL

4. FEI Number

65-0456761

Applied For

Not Applicable

Zip

33415

Country

Zip

33415

Country

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

7. Name and Address of Current Registered Agent

Name

COURTNEY, THOMAS G

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

4645 GUN CLUB RD, A-2

City

WEST PALM BEACH

FL

33415

**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

THOMAS COURTNEY 3/8/02

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	P/D COURTNEY, THOMAS G 4645 GUN CLUB RD, A-2 WEST PALM BEACH FL 33415	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS G. COURTNEY

3/8/02

561-688-2244

Date

Daytime Phone #