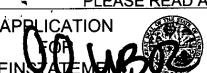
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

	FILÉE
	SELNETARY OF STATE
٠,	FEIGH OF CORPORATION

00 NOV -2 AM 9:42

DOCUMENT # P94000034509

1. Corporation Name

LAUDERDALE COPA, INC.

Principal Place of Business

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

624 S.E. 28TH STREET FT LAUDERDALE FL 33316 2800 S. FEDERAL HWY

FT. LAUDERDALE FL 33316



	esses are incorrect in any way, line al Office Address, If Applicable	nformation and enter correction below. ing Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 05/06/1994			
Suite, Apt. #, etc. Suite, Apt.			¥, etc.		5. FEI Numbe		J0/ 1994 Applied For
City & State City & Sta			e			- 65-0488180 - Not Applicat	
Zip Country Zip			Country		6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee requirements for a Certificate of Status		
7. Names and	Street Addresses of Each Officer	and/or Director (FI	orida nonprofit corpor	ations must list at le	east 3 directors)	14	
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		ch	City / State / Zip		
				2800 S. FEDERAL HWY		FT LAUDERDALE FL 33316	
						000034718 -11/21/0001 ****450.00	022018 ****150.00
	8. Name and Address of Curr	rent Registered Aç	jent		9. Name and	Address of New Registered Ag	jent
2800 S. I	D, GREGG FEDERAL HWY ERDALE FL 33316	·		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code			Zip Code
10. I, being ap Signature of Registered Age			peration am familiar v	vith and accept the	obligations of Sec	ction 607.0505, F.S.	7)
this reinsta owed by th	at I am an officer or director or the tement application, the reason for the corporation have been paid and dication is true and accurate, and the second se	receiver or trustee of dissolution has been the names of indiv	empowered to execute on eliminated, the corpiduals listed on this fo	orate name satisfie rm do not qualify fo	es the requiremen or an exemption u	ts of section 607.0401 or 617.040	11, F.S., that all fees te information indicate



COPA FT. LAUDERDALE'S ONLY LATE NIGHT CLUB

2800 S. Federal Highway Ft. Lauderdale, FL 33316 (954) 463-1508

E-mail copositioned and com

October 27, 2000

RE:

Lauderdale Copa, Inc.

DV8, Inc.

B&G Entertainment

To Whom It May Concern:

Please accept the above referenced Annual Reports for filing. I hereby request they be considered filed on a timely basis with the \$150 filing fee. I did not receive the original reports and have just now received the Notice of Administrative Dissolution or Revocation which is enclosed to complete our filing requirement.

Thank you in advance for your help with this matter.

Gregg Bernard

Very truly your

Owner