

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90382 022 ***150.00

DOCUMENT # P96000094818

1. Entity Name

L.T. Ray, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2401 N. Roosevelt Blvd.

3. Mailing Address

P.O. Box 5404

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Key West, FL

City & State

Key West, FL

4. FEI Number

65-000094818

Applied For

Not Applicable

Zip

33040

Country

USA

Zip

33045

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Jeremy Ray

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

1311 7th Street

City

Key West

FL

Zip Code

33040

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

Jeremy Ray

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/17/02
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 Fees: \$150.00
After May 1 Fees: \$50.00
Amended UBR: \$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 | D,P,T |
| NAME | Jeremy Ray |
| STREET ADDRESS | 1311 7th Street |
| CITY-ST-ZIP | Key West, FL 33040 |
| TITLE | VP,S |
| NAME | Lynn Taylor |
| STREET ADDRESS | 321 Julia Street |
| CITY-ST-ZIP | Key West, FL 33040 |
| TITLE | |
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DO NOT WRITE
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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

Jeremy Ray

(305) 304-2980

Date

Daytime Phone #

4/17/02