

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000057970

1. Entity Name

LASER TAG OF P.B. CO., INC.

FILED

May 16, 2000 8:00 am
Secretary of State

05-16-2000 90098 047 ***150.00

Principal Place of Business

Mailing Address

7685 LAKE WORTH ROAD
LAKE WORTH FL 33467

7685 LAKE WORTH ROAD
LAKE WORTH FL 33467-2534

2. Principal Place of Business

2001 10th Ave North

3. Mailing Address

7685 Lake Worth Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lake Worth, Florida

City & State

Lake Worth, FL

Zip

33461

Country

Palm Beach

Zip

33467

Country

Palm Beach

4. FEI Number

65-0767728

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VITALE, DOMENICK D
7685 LAKE WORTH ROAD
LAKE WORTH FL 33467

7. Name and Address of New Registered Agent

Name: Kassandra Lower
Street Address (P.O. Box Number is Not Acceptable): 7685 Lake Worth Road
City: Lake Worth FL Zip Code: 33467

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

Kassandra Lower - President

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

(NOTE: Registered Agent signature required when reinstating)

3-29-00

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
After MAY 1, 2000 Fee will be \$550.00
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: DPS ☐ Delete
NAME: LOWER, SANDRA
STREET ADDRESS: 7685 LAKE WORTH ROAD
CITY-ST-ZIP: LAKE WORTH FL 33467

TITLE: VP ☒ Delete
NAME: VITALE, DOMENICK D
STREET ADDRESS: 7685 LAKE WORTH ROAD
CITY-ST-ZIP: LAKE WORTH FL 33467

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: VP ☒ Change ☐ Addition
NAME: Kenneth Wright
STREET ADDRESS: 7685 Lake Worth Road
CITY-ST-ZIP: Lake Worth, FL 33467

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-00 (561)433-3500

Date

Daytime Phone #

CR2E034 19/99