

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000085134

1. Entity Name

BOTTLE CAP'S BAR & GRILL, INC.

FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90045 006 ***163.75

Principal Place of Business

17502 E COLONIAL DR
 ORLANDO FL 32820
 US

Mailing Address

2208 BAGDAD AVE.
 ORLANDO FL 32822

A0075345



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2208 Bagdad Ave.

Suite, Apt. #, etc.

Orlando, FL

City & State

32833 Orange

4. FEI Number

59-3478783

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KING, VIVIAN L
 2208 BAGDAD AVE.
 ORLANDO FL 32822

Name

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

City

FL

Zip Code

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) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME KING, VIVIAN L
 STREET ADDRESS 2208 BAGDAD AVE.
 CITY-ST-ZIP ORLANDO FL 32822

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

TITLE ☐ Delete
 NAME BARONE, JOHN V
 STREET ADDRESS 2208 BAGDAD AVE.
 CITY-ST-ZIP ORLANDO FL 32822

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 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:

Vivian L. King
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-30-00 407-880-1100

CR2E034 (5/00)

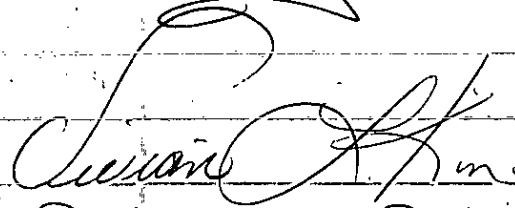
Attachment NOCH: P97000085134
A0075345

8-31-00

To Whom It May Concern:

I just spoke with a representative from your Dept. concerning the fee of \$550.00 and I am requesting a waiver of this fee because I never received a notice prior to this one. I am enclosing a check for \$150.00 and thank you in advance for your help.

Sincerely,


The
Bottlecaps Bar & Grill
2208 Bagdad Ave.
Orlando, FL 32833