

2000 UNIFORM BUSINESS REPORT (UBR)

8

DOCUMENT # P98000008808

1. Entity Name
B & T PROMOTIONS, CORP.

Principal Place of Business
5040 BEACHWOOD RD
DELRAY BEACH FL 33484

Mailing Address
5040 BEACHWOOD RD
DELRAY BEACH FL 33484

2. Principal Place of Business
5277 CEDAR LAKE RD.

3. Mailing Address
5277 CEDAR LAKE RD.

Suite, Apt. #, etc.
7-12

Suite, Apt. #, etc.
7-12

City & State
BOYNTON Bch. FL.

City & State
BOYNTON Bch. FL.

Zip
33437

Country
U.S.A.

Zip
33437

Country
U.S.A.

4. FEI Number 65-0808508

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BROWNE, RONALD
5040 BEACHWOOD RD
DELRAY BEACH FL 33484

7. Name and Address of New Registered Agent

Name: RONALD BROWNE
Street Address (P.O. Box Number is Not Acceptable): 5277 CEDAR LAKE RD.
APT. 7-12
City: BOYNTON Bch. FL Zip Code: 33437

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: Ronald Browne President DATE: 07-10-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BROWNE, RONALD 5040 BEACHWOOD RD DELRAY BEACH FL 33484	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BROWNE, MELODY 5040 BEACHWOOD RD DELRAY BEACH FL 33484	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Browne Ronald 5277 Cedar Lake Rd. APT 7-12 Boynton Bch. FL. 33437	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Browne Ricardo 5277 Cedar Lake Rd. APT 7-12 Boynton Bch. FL. 33437	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Browne Melody 5277 Cedar Lake Rd. APT 7-12 Boynton Bch. FL. 33437	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 of 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] REQUIRED DATE: 07-10-00 561-733-0513
Signature, typed or printed name of signing officer or director

FILED
Aug 22, 2000 8:00 am
Secretary of State

08-02-2000 90001 041 ***150.00



DO NOT WRITE IN THIS SPACE

CR21 034 (5/00)