

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000043582**

1. Entity Name

BAHAMIAN CONNECTION RESTAURANT GROUP, INC.

FILED
May 30, 2002 8:00 am
Secretary of State

05-14-2002 90182 001 ***150.00

05-14-2002 90182 002 *****8.75

Principal Place of Business

**4490 N.W. SECOND AVENUE
MIAMI FL 33127**

Mailing Address

**4490 N.W. SECOND AVENUE
MIAMI FL 33127**

90292



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0847.137

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**INGRAHAM, ANDREW
3520 W. BROWARD BLVD
STE 218B
FORT LAUDERDALE FL 33312**

7. Name and Address of New Registered Agent

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 \$150.00
After May 1, 2002 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 **PD** ☐ Delete
NAME **INGRAHAM, ANDREW**
STREET ADDRESS **1356 AVON LANE #84**
CITY-ST-ZIP **N FT LAUDERDALE FL 33068**

TITLE **TD** ☐ Delete
NAME **INGRAHAM, ARLINGTON**
STREET ADDRESS **744 S.W. 2ND PLACE**
CITY-ST-ZIP **DANIA FL 33004**

TITLE **SD** ☐ Delete
NAME **INGRAHAM, RICHARD**
STREET ADDRESS **511 N.E. 40TH STREET**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **D** ☐ Delete
NAME **INGRAHAM, PHILIP**
STREET ADDRESS **850 N MIAMI AVENUE #2110W**
CITY-ST-ZIP **MIAMI FL 33137**

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 **Philip Ingraham** ☐ Change ☐ Addition
NAME **850 N. MIAMI AVE #2110**
STREET ADDRESS **MIAMI, FL 33136**
CITY-ST-ZIP

TITLE **President** ☒ Change ☐ Addition
NAME **Philip Ingraham**
STREET ADDRESS **850 N. MIAMI AVE #2110**
CITY-ST-ZIP **MIAMI, FL 33136**

TITLE **Vice President** ☒ Change ☐ Addition
NAME **Andrew Ingraham**
STREET ADDRESS **1356 Avon Lane #64**
CITY-ST-ZIP **N. Ft Lauderdale, FL 33068**

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

Philip Ingraham

4/26/02

305-576-6999

CR2034 (9/01)