

2002
~~2001~~ **UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90086 017 ***150.00

DOCUMENT # P98000046608

1. Entity Name

LATIN QUARTER ENTERTAINMENT, INC. ✓

Principal Place of Business

32 S. HARBOR DRIVE
KEY LARGO, FL 33037

Mailing Address

32 S. HARBOR DRIVE
KEY LARGO, FL 33037

2. Principal Place of Business

8950 RED ROAD

3. Mailing Address

8950 RED ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PINECAST, FL

City & State

PINECAST, FL

4. FEI Number

65-0840111

Applied For

Not Applicable

Zip

33156

Country

U.S.A.

Zip

33156

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANCHESTER, JEFFREY C.
32 S. HARBOR DRIVE
KEY LARGO, FL 33037

7. Name and Address of New Registered Agent

Name
MANCHESTER, JEFFREY C.
Street Address (P.O. Box Number is Not Acceptable)
8950 RED ROAD

City
PINECAST

FL

Zip Code

33156

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

4/29/02

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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
MANCHESTER, JEFFREY C.
32 S. HARBOR DRIVE
KEY LARGO, FL 33037 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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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
DIRECTOR
MANCHESTER, JEFFREY C.
8950 RED ROAD
PINECAST, FL 33156 ☒ 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

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 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

4/29/02 (307) 666-9683

Daytime Phone #

CR2E034 (11/00)