

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90203 005 ***150.00

0404153 AV

DOCUMENT # P99000043710

1. Entity Name
BOCA NIGHTCLUB, INC.



Principal Place of Business
**7000 W. PALMETTO PARK RD
#102
BOCA RATON FL 33433
US**

Mailing Address
**7000 W. PALMETTO PARK RD
#102
BOCA RATON FL 33433
US**

60023596



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0929177**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MASH, MICHAEL A JR
10 THURSTON DR
PALM BEACH GARDENS FL 33418**

7. Name and Address of New Registered Agent

Name **MASH, MICHAEL A. JR.**
Street Address (P.O. Box Number is Not Acceptable) **148 NEWCASTLE DRIVE**
City **JUPITER** FL **33458**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Michael A. Mash Jr*
Signature, typed or printed name of registered agent and title if applicable.

PRESIDENT

4/18/03
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DPTS** ☐ Delete
NAME **MASH, MICHAEL A JR**
STREET ADDRESS **10 THURSTON DR**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE **AS** ☐ Delete
NAME **MASH, CLEVE**
STREET ADDRESS **10 THURSTON DRIVE**
CITY-ST-ZIP **PALM BEACH GRDNS FL 33418**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition
NAME **148 NEWCASTLE DRIVE**
STREET ADDRESS **JUPITER, FL. 33458**
CITY-ST-ZIP

☐ Change ☐ Addition
NAME **4161 HICKORY DRIVE**
STREET ADDRESS **PALM BEACH GARDENS, FL. 33418**
CITY-ST-ZIP

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael A. Mash Jr* **PRESIDENT**

4/18/03
Date

(561) 392-3747
Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL A. MASH JR

CR2E034 (10/02)