

V72785

## Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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## To:

Division of Corporations

Fax Number : (850) 922-4000

## From:

Account Name : KRAMER, GREEN, ZUCKERMAN &amp; KAHN, P.A.

Account Number : 073707002173

Phone : (954) 966-2112

Fax Number : (954) 981-1605

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

## REGISTERED AGENT CHANGE

GALEON TAVERN, INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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11/27/00  
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# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of \_\_\_\_\_ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : GALBON TAVERN, INC.
2. The mailing address of the corporation : 2401 10th Avenue. N  
Lake Worth, FL 33461
3. Date of incorporation/qualification: 10/19/92 Document number: V72785
4. The name and address of the current registered agent and office:  
Thomas J. Yeager  
1645 Palm Beach Lakes Blvd., Suite 1200  
West Palm Beach, FL 33401
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)  
Robert M. Kramer  
4000 Hollywood Blvd., Suite 485 South  
Hollywood, FL 33021

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

11-22-00  
(Date)

LEON PULIS, Director

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

(Signature of Registered Agent)

Nov. 22, 2000  
(Date)

If signing on behalf of an entity:

Robert M. Kramer

(Typed or Printed Name)

President

(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*

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DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FL 32314

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TOTAL P.02

Prepared by: Robert M. Kramer, Bar No. 181940, 4000 Hollywood Blvd., Suite 485 South, Hollywood, FL 33021  
Phone: (954) 966-2112

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