City of Fort Lauderdale 100 N Andrews Ave, 1st Floor Ft. Lauderdale, FL 33301 (954) 828-5195 **Business Tax Application** 沤 New Business Transfer-Change of Address Office Use Only □ Transfer-Change of Ownership Business ID# □ Name Change (Only) Other Business# Date 52919 Business Name or DBA (fictitious name): Jano Coach Lines Inc. Corporation Name: Jano (bach Lines, Inc. Business Address: 3615 Davie Blvd Fort Landerdale FL 33312 Mailing Address (if different): 8930 W. State Rd 84 # 106 Davie FL 33324 Business Phone: <u>954-473-6631</u> email: information@larryslimd.com Federal Tax ID#: 4(0-5)23672 Name/Title: Jason Janowitz, President Address: 13321 SW 16th ct Davic FL 33325 Driver License #: 1532437 860100 State: FL DOB: 1-10-86 Phone: 954-448-0900 Email Address: Jason @ larryslimo. (om State License #: Agency: ____Expires:____ Type: Federal License #: 2493676). /) .~ Agency: Type: Expires: (If this section is applicable include a copy of your State or Federal license)

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Business Operation

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Type of Business / Products/ Services offered (circle all that apply)		
Retail/Wholesale Hotel/Motel Apartments Social Service Office Only Professional Contractor		
Restaurant Nightclub Entertainment Cocktail Lounge/Bar Home Based Business Service Church		
Other (be specific):		
NOTE: ALL BUSINESS OPERATIONS MUST BE CONDUCTED WITHIN A COMPLETELY ENCLOSED BUILDING UNLESS OTHERWISE PERMITTED BY ZONING. NO OUTDOOR MUSIC, ENTERTAINMENT, DISPLAY, SALE, DINING, ETC. WITHOUT PRIOR APPROVAL.		
Type of Product/ Services/ Businesses Offered (in detail):		
Grand Transportation Services		
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Days/Hours of Operation: Sunday - Saturclay 24hrs Number of Employees: 6		
Approximate Total Square Footage: Dining:Office: 250D Saft Storage: Included		
Entertainment area: Home Office Space: Church:		
Other:		
What type of business previously operated at this property? Gym Office		
Will you be sharing space with another business? Y (N)		
If yes, Business Name:		

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If yes, Alcohol Series: _

If yes, an After Hours Permit will be required for alcohol sales or service after midnight.

NOTE: All businesses involved in the sale of alcoholic beverages must follow requirements of City Ordinance, Chapter 5.

2. Does the business feature, promote, depict, allow, or display any type of nudity? $Y_{1/N}$

If yes, explain:

NOTE: May be subject to the requirements of City Ordinances, Chapter 5 and ULDR 47-18 (Adult Uses) and any other applicable ordinances.

- NOTE: Outdoor entertainment is prohibited except in the Special Entertainment Overlay District. Indoor entertainment must meet requirements under CO Chapter 17 noise control. In addition, all establishments licensed under the state beverage law must meet requirements of City Ordinance 5-34

4. Do you have coin or token operated vending machines or ATM machines? Y (N)

If yes, how many of each type:

5. Will you practice clairvoyance, fortune telling, mind reading, faith healing, divine healing, astrology, or Phrenology, or are you acting as a medium at this location? Y (N)

NOTE: If yes, must file a sworn application as outlined in City Ordinance 15-50

- 6. Is the business involved in the sale or advertising of motor vehicles? Y /(N)
- 7. Does the business own and/or operate any trucks or motor vehicles in conjunction with this business for delivery, merchandise selling, service, etc? (Y) N

If yes, Location they will be stored: <u>3615 Davie Blvd Ft. Lauderdale FL 33312</u>

- 8. Has there been or will there be any interior/exterior alterations made? Y $i(\hat{N})$
 - a. If yes, Permit #'(s):
 - b. Was a certificate of Occupancy issued for these renovations? Y/N (If yes, attach copy)
- 9. Will there be outdoor storage of any kind? Y (N) (Note: all outdoor storage, <u>if</u> permitted as an accessory use, must meet requirements of CO 47-19.9)
- 10. Is this a Church? YN.If yes, indicate the number of seats ______.

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I HEREBY DECLARE that all information provided in this application is true and correct and, further, understand that providing false or misleading information on this application may result in being denied, or the loss thereof, of any Business Tax receipts, permits, or approvals issued by the City of Fort Lauderdale, which were based upon information provided in this application. I further understand that if there are any subsequent changes in the operation of my business as stated in this application, that I agree to file a new application and seek prior approval from the City of Fort Lauderdale for any such changes. Failure to obtain the necessary approval will result in the loss of any previous Business Tax receipt, permits, or approvals issued by the City of Fort Lauderdale that were based on this initial application. I further understand that the issuance of a Business Tax receipt is contingent on compliance with all building and zoning ordinances of the City of Fort Lauderdale and that compliance must be maintained. Such compliance includes but is not limited to hiring a licensed contractor to obtain permits for any signage, alterations, or renovations to the property, parking requirements, and compliance with the City's noise control ordinance.

Business Ow	ner/Applicant Signature	tt
		Jason Janowitz
		Print Name
STATE OF Florida COUNTY OF <u>Broward</u>	: :	
	knowledged before me th Prcsidcrr+ Who are ⊠ personally as identifica	, of <u>Jano Coach Lines Inc</u> a known to me or have produced
(SEAL)		- tu Kolhan
CORY ANN BACHAN	(Si	Notary Public, State of <u>FloriclQ</u> gnature of Notary taking Acknowledgment)
MY COMMISSION #FF939007 EXPIRES: NOV 24, 2019 Bonded through 1st State Insurance		ory Ann Bachan Name of Notary Typed, Printed or Stamped
	r	My Commission Expires: Nov 24,2019
	(Commission Number: <u>FF 939007</u>

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