Expiration date: 06/30/2022



## **Business License Renewal**

220 SE Green Street Lee's Summit, MO 64063 Phone 816.969.1220 / Fax 816.969.1221 / www.cityofls.net

TOPSY'S POPCORN Licensing 221 W 74TH TERR KANSAS CITY, MO 64114

#### PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

Please Update your Information. If there are changes to the information provided, please draw a line through and correct.

Physical Business Address:

880 NW BLUE PKWY I LEES SUMMIT, MO 64086

Business E-Mail Address:: PWILSON@TOPSYSPOPCORN.COM Legal Name of Business: (if different than DBA): RPR ENTERPRISES INC

Type of Organization:

Retail Trade

Please provide your NAIC Code:

Renew on-line communications email address: Dwilson@topsyspopcom.com (If you would like to renew on-line, you must provide an email above. This email address could be different than the Business Email Address. This email address is the person that is responsible for Business Licenses/Renewals at your place of business) \*\*IMPORTANT! If you would like to RENEW your Business License online, please visit https://devservices.cityofls.net/renew-business-license.html for instructions.

Business Phone Numbers:

| Primary    | Cell       | Fax        |
|------------|------------|------------|
| 8163471828 | 9136206496 | 8165234747 |

### Contact Information:

| Primary   | Secondary   | Emergency |  |  |
|---|---|-----------|--|--|
| PAM WILSON, Address:221 W 74TH<br>TER, Phone:(816) 523-5555 | JAMIE LESTER, Address:221 W<br>74TH TER, Phone:(913) 620-6496 |           |  |  |
|   |   |           |  |  |
|   |   |           |  |  |

(Continued on back page)

| popcorn + beverage sales |   |  |   |                          |   |  |
|--------------------------|---|--|---|--------------------------|---|--|
| ' '                      |   | 0  |   | 2012012                  |   |  |
|                          |   |  |   |                          |   |  |
| F DOING ANY              | RETAIL SALES (provide   | copy of curren   | t no sales tax o                              | lue letter) - 10405879   | 9   |  |
|                          |   |  |   |                          |   |  |
|                          |   | . I  | this section M                                | IST be completed*        |   |  |
|                          | es physically located in  |  |   |                          |   | 00 8.553.65                                    |
| Has your Ph              | ysical Address changed  | over the last ye   | ar? Y o(N) (If ye                             | s complete Zoning Ap     | proval Form)  |  |
|                          | located in a Lee's Summer an intrusion alarm? Y   |  | rea or Residentia                             | I? (circle)              |   |  |
|                          | ng Square Footage - 118   |  |   |                          |   |  |
| Employee F               | leadcount for this locati   | on:  |   |                          |   |  |
| Full Time: 5             | i ·   |  |   |                          |   |  |
| Part Time: 2             |   |  |   |                          |   |  |
| Temporary:               |   |  |   |                          |   |  |
| IF DOING AT              | NY RETAIL SALES (provide of   | opy of current no  | sales tax due le                              | ter) - 10405879          |   |  |
| - IE DUVSICAI            | ADDRESS HAS CHANGED   | WITHIN LEE'S SU  | IMMIT. PLEASE SI                              | JBMIT A NEW ZONING       | FORM. Zoning for  | ms located on                                  |
|                          | www.cityofls.net.   |  | ,   |                          |   |  |
|                          |   |  |   |                          | -6.   |  |
|                          |   |  |   |                          |   |  |
| FEE CALCULA              | ATION (please check those   | that apply):   |   |                          |   |  |
|                          | X \$50 Business License   | Fee (base fee)   |   |                          |   |  |
|                          | 7 930 Business Livering   |  |   | and 25% (in delineur)    | et 60 days after ex   | (niration)                                     |
| . I                      |   |  |   |                          |   | cpiration                                      |
|                          | Penalty for delinque  | nt license is 5% p   | er month not to e                             | xceeu 25% (is deiliiquei | ne oo days area. o.   |  |
|                          | Penalty for delinque  | nt license is 5% p   | er month not to e                             | xceeu 25% (is deimquei   |   |  |
| L declare uno            | Total fee   |  |   |                          |   |  |
| I declare uno            |   |  | knowledge and l                               | pelief the statements m  |   |  |
| $x(\mathcal{S})$         | Total fee   | to, the best of my   | knowledge and l                               |                          | ade herein are tru  |  |
| X<br>Signature of        | Total fee  er penalty of perjury that  Owner(s) or Corporation A  | to the best of my  | knowledge and l<br>X                          | pelief the statements m  | ade herein are tru  | ne and correct.  5 19 2 Date                   |
| X Signature of           | Total fee  Per penalty of perjury that  Owner(s) or Corporation A   | to the best of my  | x Title                                       | pelief the statements m  | ade herein are tru  | ne and correct.  5 19 2  Date  regulated under |
| X Signature of           | Total fee  Per penalty of perjury that  Owner(s) or Corporation A  This application or the graphs of the zoning code, and                           | to the best of my Agent/Owner Inting of a businessis further subject | x Title  ss license neither to all applicable | confirms nor approves t  | ade herein are tru<br><br>c<br>the use of land as<br>laws and regulatio | ne and correct.  1918  Pate  regulated under   |
| X Signature of           | Total fee  Per penalty of perjury that  Owner(s) or Corporation A   | to the best of my Agent/Owner Inting of a businessis further subject | x Title  ss license neither to all applicable | confirms nor approves t  | ade herein are tru<br><br>c<br>the use of land as<br>laws and regulatio | ne and correct.  5 19 2  Date  regulated under |
| X Signature of           | Total fee  er penalty of perjury that  Owner(s) or Corporation A  this application or the gra ns of the zoning code, and upations and businesses. P | to the best of my Agent/Owner Inting of a businessis further subject | x Title  ss license neither to all applicable | confirms nor approves t  | ade herein are tru<br><br>c<br>the use of land as<br>laws and regulatio | ne and correct.  5 19 2 Date  regulated under  |

TAXATION DIVISION PO BOX 3666 JEFFERSON CITY, MO 65105-3666



# Missouri DEPARTMENT OF REVENUE

Telephone: 573-751-9268 Fax: 573-522-1265

E-mail: taxclearance@dor.mo.gov

RPR ENTERPRISES INC 221 W 74TH TER KANSAS CITY, MO 64114

DATE: 06/13/2022

VALID THROUGH: 09/12/2022

LEES SUMMIT

06/13/2022

### CERTIFICATE OF NO TAX DUE

MISSOURI TAX IDENTIFICATION NUMBER: 10405879

To Whom it May Concern: The Missouri Department of Revenue certifies the above listed taxpayer has filed all required returns and paid all sales or withholding tax due, including penalties and interest, and does not owe any sales or withholding tax, as of 06/13/2022. This review does not include returns that are not required to be filed as of this date or that have been filed but not yet processed by the Department.

This statement only applies to sales and withholding tax due and is not to be construed as limiting the authority of the Director of Revenue to assess, or pursue collection of liabilities resulting from final litigation, default in payment of any installment agreement entered into with the Director of Revenue, any successor liability that may become due in the future, or audits or reviews of the taxpayer's records as provided by law.

THIS CERTIFICATE REMAINS VALID FOR 90 DAYS FROM THE ISSUANCE DATE.

TAXATION DIVISION