2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State
01-30-2001 90031 004 ***150.00

DOCUMENT # 492206

1. Entity Name
SELECTIVE LANDSCAPE COMPANY

Principal Place of Business	Mailing Address
~~6741 SW 155 AV~~ MIAMI FL 33193-2116 US	~~6741 SW 155 AVE~~ MIAMI FL 33193-116 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14100 SW. 182 AVE.	14100 SW. 182 AVE.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL.	City & State: MIAMI, FL.
Zip: 33196 Country:	Zip: 33196 Country:

4. FEI Number 59-1633946 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ORTEGA JR,BERNARDO
~~6741 SW 155 AVENUE~~
MIAMI FL 33193

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
14100 SW. 182 AVE.
City MIAMI, FL. FL Zip Code 33196

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

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	VPS	☐ Delete	TITLE		☒ Change ☐ Addition
NAME	ORTEGA, MARTA		NAME		
STREET ADDRESS	~~6741 S.W. 155 AVE~~		STREET ADDRESS	14100 SW 182AV	
CITY-ST-ZIP	MIAMI, FL 00000		CITY-ST-ZIP		
TITLE	PD	☐ Delete	TITLE		☒ Change ☐ Addition
NAME	ORTEGA, BERNARDO, JR.		NAME		
STREET ADDRESS	~~6741 S.W. 155 AVE~~		STREET ADDRESS	14100 SW 182AV.	
CITY-ST-ZIP	MIAMI, FL 00000		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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] BERNARDO ORTEGA JR. 01/15/01 305 388 3898
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)