

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90082 037 ***150.00

0369894 AV

DOCUMENT # P94000057495

1. Entity Name
GREEN TEAM ENTERPRISES, INC.

Principal Place of Business

4260 N.W. 1ST AVE
STE 54
BOCA RATON FL 33431
US

Mailing Address

4260 N.W. 1ST AVE
STE 54
BOCA RATON FL 33431
US

2. Principal Place of Business

125 N Congress Ave
Suite 12
DeBary Beach, FL
Zip 33445
Country US

3. Mailing Address

125 N Congress Ave
Suite 12
DeBary Beach, FL
Zip 33445
Country US



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0507487

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROGERS, JON S
4260 N.W. 1ST AVE
STE. 54
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

125 N Congress Ave
Ste 12

City

DeBary Beach

FL

Zip Code

33445

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]
Signature, typed or printed name of registered agent and title if applicable.

[Signature]
(NOTE: Registered Agent signature required when reinstating)

[Signature]
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, 2002 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

TITLE	P	<input type="checkbox"/> Delete
NAME	WELZ, ANDREW J	
STREET ADDRESS	4260 NW 1ST AVE. #54	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	VP	<input type="checkbox"/> Delete
NAME	ROGERS, JON S	
STREET ADDRESS	4260 NW 1ST AVE. STE #54	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PHINNEY, MARK	
STREET ADDRESS	4260 N.W. 1ST AVE, STE 54	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	125 N Congress Ave #12
CITY-ST-ZIP	DeBary Beach, FL 33445
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	125 N Congress Ave #12
CITY-ST-ZIP	DeBary Beach, FL 33445
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	125 N Congress Ave #12
CITY-ST-ZIP	DeBary Beach, FL 33445
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]
Date

[Signature]
Daytime Phone #

CR2E034 (9/01)