2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED Jan 12, 2000 8:00 am DOCUMENT # 431349 **Secretary of State** A LANDSCAPING AND SPRINKLER COMPANY INC 01-12-2000 90091 024 ***150.00 Mailing Address Principal Place of Business 1194 HILLSBORO MILE 1194 HILLSBORO MILE HILLSBORO BEACH FL 33062-1515 AUUU1041 HILLSBORO BEACH FL 33062 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1535423 Not Applicable \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent. Name DANDENEAU, ANDRE M Street Address (P.O. Box Number is Not Acceptable) 1194 N OCEAN BLVD HILLSBORO BEACH, FL 33062 Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE Delete TITLE DANDENEAU, ANDRE M NAME NAME STREET ADDRESS 1194 N OCEAN BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILLSBORO BEACH, FL00000 Change ☐ Addition ☐ Delete TITLE TITLE DANDENEAU, ANDRE M NAME STREET ADDRESS 1194 N OCEAN BLVD #28 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILLSBORO BEACH, FL00000 Change . . . Addition TITLE TITLE Delete >--NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE 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, Piprida Statutes; and that my name appears in Block 11 or Block 12 if

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ANDENEAU

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Daytime Phone #