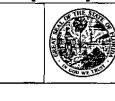
2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

504438 DOCUMENT

1. Entity Name

SOIL FUMIGANTS COMPANY, INC.



Principal Place of Business 1690 BEARDALL AVE. Si

Mailing Address 1690 BEARDALL AVE.

. Principal Place of Business	3. Mailing Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State	City & State				

FILED Apr 21, 2003 8:00 am Secretary of State

04-21-2003 90420 039 ***150.00

SANFORD FL 32771 SANFORD FL 32772-1447		17 						
2. Principal F	Place of Business	3. Mailing Address			E 1881 (8) BUTLE BANK MEMIT ALANA UNION LINES CANA		BIBIT BIBIT IDBI	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
City & Star	te	City & State		4.	FEI Number 59-1679147		pplied For lot Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Ac		
	6. Name and Address of Current	Registered Agent		7.	Name and Address of New Registe	red Agent		
			Name					
RUSSELL	, JOHN F.		Stroot Ad	drana /P.O. I	Box Number is Not Acceptable)	 -		
950 POW	HATAN DR		Street Ad	uless (F.O. t	sox Number is Not Acceptable)			
SANFORE	O FL 32771							
			City	V-serv		FL Zip Coo	de	
	a named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent		ts registered office or r			am familiar with	, and accept	
						· · · · · · · · · · · · · · · · · · ·		
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	f State			 Election Campaign Financing Trust Fund Contribution. 	\$5.0 □ Adde	00 May Be d to Fees	
10.	OFFICERS AND		11.		L DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	8S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVP RUSSELL, JOHN F 950 POWHATAN DRIVE SANFORD FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		SENTENDIA TRANSPORTATION OF THE SENTENDIA SENT	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RUSSELL, JIMYE K. 950 POWHATHAN DRIVE SANFORD FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
THTLE NAME STREET ADDRESS CITY-ST-ZIP		- Tollete	NAME STREET ADDRESS CITY-ST-ZIP		Time is distilled	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	<u>-</u>		☐ Change	☐ Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

Delete

Change

Addition

CR2E034 (10/02)