

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90177 047 ***150.00

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DOCUMENT # 540873

1. Entity Name
B & R LANDSCAPING, INC.



Principal Place of Business
**855 NW 164 AVE
PEMBROKE PINES FL 33028
US**

Mailing Address
**P O BOX 821263
SOUTH FLORIDA FL 33082
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

17431 SW 266 TERR

17431 SW 266 TERR

City & State

City & State

HOMESTEAD, FLORIDA

HOMESTEAD, FLORIDA

Zip

Country

Zip

Country

33031

DADE

33031

DADE

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1754341**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUCKLEY, HOWARD

855 NW 164 AVE

PEMBROKE PINES FL 33028

Name

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

17431 S.W. 266 TERR

City

HOMESTEAD

FL

Zip Code

33031

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **BUCKLEY, HOWARD**
STREET ADDRESS **855 NW 164 AVE**
CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE ☒ Change ☐ Addition
NAME **17431 S.W. 266 TERR,**
STREET ADDRESS **HOMESTEAD, FLORIDA 33031**

TITLE **VS** ☐ Delete
NAME **BUCKLEY, ELINDA**
STREET ADDRESS **855 NW 164 AVE**
CITY-ST-ZIP **PEMBROKE PINES FL 33028**

TITLE ☒ Change ☐ Addition
NAME **17431 S.W. 266 TERR,**
STREET ADDRESS **HOMESTEAD, FLORIDA 33031**

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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.

SIGNATURE: **HOWARD F. BUCKLEY** 4-21-03 305-242-7101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)