

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 05, 2002 8:00 am
Secretary of State

08-05-2002 90006 048 ***150.00

DOCUMENT # J95192

1. Entity Name
MITE-E-FINE LAWN MAINTENANCE, INC.

Principal Place of Business Mailing Address
640 N.E. 35TH STREET 640 N.E. 35TH STREET
POMPANO BEACH FL 33064 POMPANOB BEACH FL 33064



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **65-0008278** Applied For
 Not Applicable

Zip Country Zip Country 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

~~FAHMY & COMPANY~~
~~2213 E ATLANTIC BLVD~~
~~POMPANO BEACH FL 33062~~

Name **MARY E. BROWN**
 Street Address (P.O. Box Number is Not Acceptable)
640 N.E. 35 ST.
Pomp. Bch, FL
 City **FL** Zip Code **33064**

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 Mary E. Brown sec/treas. 8/2/02
 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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BROWN, ROBERT D. 640 N.E. 35TH STREET POMPANO BEACH FL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DST MARY E. BROWN 640 N.E. 35TH STREET POMPANO BEACH FL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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: MARY E. BROWN sec/treas. 8/2/02 (954) 942-0299
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment A-95792 972w/8/2/02

I did not receive my corp. last notice of pymt. this year. As in the past I have always paid it on time since actual corp. in the year 1987.

Please consider to waive the late fee as I have never been late with it in the past.

Enclosed fee of original 150.

You call contact me at (954) 942-0299