

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K31348

1. Entity Name

LEAL SOD SERVICE, INC.

FILED

Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90078 001 ***150.00

01-31-2001 90078 002 *****8.75

Principal Place of Business

822 117TH ST E
BRADENTON FL 34202
US

Mailing Address

P.O. BOX 1205
BRADENTON FL 34206
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0065531

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

LEAL, SANTIAGO G
822 117TH ST E
APT. 420
BRADENTON FL 34202

Name

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

City

FL

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

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 \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PV
NAME LEAL, SANTIAGO G
STREET ADDRESS 822 117TH ST E
CITY-ST-ZIP BRADENTON FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME LEAL, PABLO
STREET ADDRESS 1713 MANATEE AVE W
CITY-ST-ZIP BRADENTON FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME ~~NARVAEZ, MARTHA~~
STREET ADDRESS 1218 22ND AVE W
CITY-ST-ZIP PALMETTO FL ☐ Delete

TITLE
NAME Martha Narvaez
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE T
NAME LEAL, ARMANDO
STREET ADDRESS 1713 MANATEE AVE
CITY-ST-ZIP BRADENTON FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Martha Narvaez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-01
Date

(941)748-3200
Daytime Phone #

CR2E034 (10/00)