2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # L92025

1. Entity Name
SOUTH FLORIDA GREEN

FILED

01 NOV 26 PM 3: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1811 SW 99 PL
MIAMI, FLORIDA
33165

Mailing Address
P.O. Box 248698
Coral Gables, FLORIDA
33124

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1811 SW 99 PL	P.O. Box 248698
Suite, Apt. #, etc. MIAMI	Suite, Apt. #, etc. Coral Gables
City & State FL.	City & State FLORIDA
Zip 33165 — Country DADE USA	Zip 33124 — Country DADE

4. FEI Number 65-0122115 ☐ 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
MAYER, KENNETH WARNER	Name
8500 SW 8th St. STE. 250	Street Address (P.O. Box Number is Not Acceptable)
MIAMI FL. 33144	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT / MIKE FLEITES / 1811 SW 99 PL / MIAMI FLA. 33165	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY / MARIE P. FLEITES / 1811 SW 99 PL / MIAMI, FL. 33165	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	700004721147--2 -12/12/01--01077--002 ****150.00 ****150.00	☐ Change ☐ Addition
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CR2E034 (11/00)

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: [signature] 9/20/01 (305) 485-3244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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SOUTH FLORIDA GREEN, INC.
P.O.BOX 248698
CORAL GABLES, FLORIDA 33124

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O.BOX 6327
TALLAHASSEE, FLORIDA 32314

Dear Sir:

As per our phone conversation I am sending you the initial fee of $150.00 since I never received the first bill to my old address.
I did change my address at the post office but it seems that it got lost in the mail.
Next year I will make sure that I look for the report to send it on time.

Yours truly,

Mike Fleites
President