2001 UNIFORM BUSINESS REPORT (UBR) Jun 14, 2001 8:00 am DOCUMENT # / POOOOOO 79/56 **Secretary of State** 06-14-2001 90013 003 ***150.00 NoPal Enterprises, Inc. Mailing Address 16465 N.E. 22 AV 16465 N.E. 22 AV 10073232 # 201 , North Miani Beach #201 , North Miami Beach FL , 33160 FL, 33160 2. Principal Place of Business 3. Mailing Address 16465 N.E 22 AV 16465 Ν·Ē Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE #201 City & State City & State Applied For-4. FEI Number North Might Bear North Midni 65-1034574 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 33160 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Gas Par Dysla Street Address (P.O. Box Number is Not Acceptable) 16465 N.E. 22 AV North Mismi Beach Zip Code 33160 33 /60 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. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See.criteria.on.back)_____ Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ☐ Delete ☐ Addition NAME Gastar AYALA 16465 NE 22 AV #201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP North Migni Beach, FL, 33 160 CITY-ST-ZIP TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TiitE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZiP TITLE ☐ Delete Change 'Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING O

05-31-01

(305) 919 8292 (305) 945 505 <u>3</u>

Daytime Phone #

LASHBROOK & WOLLARD, P.A. CERTIFIED PUBLIC ACCOUNTANTS

Affachment AU073232

Dru D. Lashbrook, CPA Brian H. Wollard, CPA David J. Fasano, CPA, MBA Dean R. Lashbrook

Member of the Florida Institute of Certified Public Accountants 4481 Stirling Road Fort Lauderdale, Florida 33314 Telephone: (954) 581-8112 Fax: (954) 581-2554 info@lbrook.com

June 7, 2001

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Paradise Found Landscaping, Inc.
Document # P92000009630

To Whom It May Concern:

We are the Certified Public Accountants for the above referenced corporation. The taxpayer contacted the State because he never received the original 2001 Uniform Business Report. He was told to mail a report with a check for \$150.00 immediately.

Enclosed please find the report and a check for \$150.00 as requested. Thank you for your assistance in this matter, and if you should have any questions please contact our office.

Sincerely,

LASHBROOK & WOLLARD, P.A.

Dru D. Lashbrook, CPA,

for the firm.

DDL/keb Enclosures