

2004 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P000000105637**

1. Entity Name

Adam's Affordable Tree Service INC.

Principal Place of Business

Mailing Address

**6711 NW 7th
Margate FL 33063**

**400 NW 65th Ave
Apt 118 Margate
FL 33063**

2. Principal Place of Business

6711 NW 7th

3. Mailing Address

400 NW 65th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

118

City & State

Margate FL

City & State

Margate FL

Zip

33063

Country

USA

Zip

33063

Country

USA

4. FEI Number

65-1053977

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**Kevin Schiavone
400 NW 65th Ave Apt 118
Margate FL 33063**

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 \$550.00
After September 12, 2001 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

TITLE **President** ☐ Delete
NAME **Kevin Adam Schiavone**
STREET ADDRESS **400 NW 65th Ave #118**
CITY-ST-ZIP **Margate FL 33063**

TITLE ☐ Change ☐ Addition
NAME **000005554160--1**
STREET ADDRESS **-05/16/02--01018--008**
CITY-ST-ZIP ******150.00 ****150.00**

TITLE **Vice President** ☐ Delete
NAME **leslie ANN Kowalskie**
STREET ADDRESS **400 NW 65th Ave #118**
CITY-ST-ZIP **Margate FL 33063**

TITLE ☐ Change ☐ Addition
NAME **000005554160--1**
STREET ADDRESS **-05/16/02--01018--009**
CITY-ST-ZIP *******8.75 *****8.75**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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:

Kevin A. Schiavone **1-3-02** **968-4896**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/01)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 27, 2002

ADAM'S AFFORDABLE TREE SERVICE, INC.
6711 NW 7TH COURT
MARGATE, FL 33063

SUBJECT: ADAM'S AFFORDABLE TREE SERVICE, INC.
Ref. Number: P00000105637

We have received your document for ADAM'S AFFORDABLE TREE SERVICE, INC. and check(s) totaling \$8.75. However, your check(s) and document are being returned for the following:

Our office has decided to grant a one time waiver of the reinstatement fee provided you return your corrected document, your letter requesting a waiver, this letter and a check totaling \$150.00 within 30 days of the date of this letter.

There is not a registered agent designated on the report. Please enter the current registered agent's name and Florida street address. If this is a change from the registered agent previously filed with this office, the new agent must sign accepting the designation.

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Kathy Ashton
Document Specialist

Letter Number: 902A00018366

Adams Affordable
Tree Service Inc.

To
Kathy Ashlon

Please grant our LNC this
one time waiver for of
reinstallments we ~~were~~ not
guided properly one how to
fill out the report thank
you for your help

VP-Jessie Howard
Resident Schawal