2002 UNIFORM BUSINESS REPORT (UBR)

Sep 25, 2002 8:00 am Secretary of State P01000060264 **DOCUMENT #** 1. Entity Name 09-25-2002 90124 009 ***150.00 INFINITE DESIGN LANDSCAPING, INC. Principal Place of Business Mailing Address 740 CAVALLA RD. 813942 740 CAVALLA RD. ATLANTIC BCH FL 32233 ATLANTIC BCH FL 32233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HEUSTIS, CAMERON Street Address (P.O. Box Number is Not Acceptable) 740 CAVALLA RD. ATLANTIC BCH FL 32233 City 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. I am familiar with, and accept the obligations of registered agent. 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 FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make. Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition HEUSTIS, CAMERON NAME NAME 740 CAVALLA RD. STREET ADDRESS STREET ADDRESS ATLANTIC BCH FL 32233 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Сhange ☐ Addition HEUSTIS, CATHERINE NAME NAME 740 CAVALLA RD. STREET ADDRESS STREET ADDRESS ATLANTIC BCH FL 32233 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of

FILED

Elle charl To whom it may concern, Please accept this fardy form without a late e for we did not recieve a ust year of owning our own had to submit this UBR. We are and will be so grateful if The late for would be waived for \$400 is not within the budget of a struggling new business. Shank you so much for your consideration ames C. Heustin owner)