

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 29, 2002 8:00 am**  
**Secretary of State**

09-29-2002 90001 006 \*\*\*150.00

DOCUMENT # *P01000076092*

1. Entity Name

JUST MULCH INC

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
2609 S. 16TH STREET

3. Mailing Address  
P O BOX 13433

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
FT. PIERCE FL

City & State  
FT PIERCE FL

Zip  
34982

Country  
USA

Zip  
34979

Country  
USA

4. FEI Number  
65-1128682

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name - NIECOLE L ANDERSON

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

2609 S 16TH STREET

City FT PIERCE

FL

Zip Code  
34982

**DO NOT WRITE  
IN THIS SPACE**

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

*Nicole L Anderson*  
Signature, typed or printed name of registered agent and date if applicable  
NIECOLE L ANDERSON

(NOTE: Registered Agent signature required when reinstating)

DATE  
9/18/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT, ANDERSON, NIECOLE L 2609 S 16TH STREET FT PIERCE FL 34982
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Nicole L Anderson*  
Signature and typed or printed name of signing officer or director  
NIECOLE L ANDERSON

DATE  
9/18/02

772-971-2810  
Daytime Phone #

CR2E034B (12/01)

Attachment 874146

#P01000076092

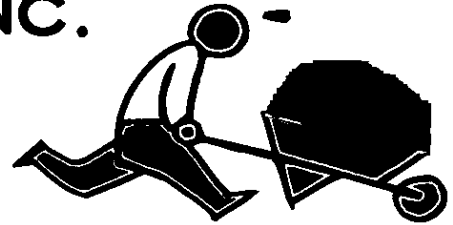


## JUST MULCH INC.

FREE ESTIMATES

772-971-2810

JUSTMULCH@AOL.COM



TO WHOM IT MAY CONCERN,

THIS IS THE FIRST YEAR FOR ME RUNNING MY FLORIDA CORPORATION. I  
~~—APOLOGIZE FOR MY TARDINESS. I HAVE MOVED MY MAILING ADDRESS TO A PO~~  
BOX # AND ACTUALLY THIS IS THE SECOND ONE I HAVE HAD. THIS MAY BE  
WHY I NEVER RECEIVED THE UNIFORM BUSINESS REPORT APPLICATION. MY  
MAILING ADDRESS IS NOW A PERMANENT ONE. I HAVE FILLED OUT THE  
APPLICATION ACCORDINGLY. I WAS JUST NOTIFIED BY A FRIEND ABOUT THIS  
CORPORATION RENEWAL AND THEN CALLED TO FIND OUT WHAT I HAD TO DO.  
I HAVE DOWNLOADED THIS APPLICATION FROM THE INTERNET. I WAS TOLD TO  
SEND WITH IT A LETTER OF EXPLANATION FOR WHAT HAS HAPPENED ALONG  
WITH MY \$150.00 FEE. PLEASE KNOW THAT NEXT YEAR I WILL BE ON TOP  
OF THIS MATTER. THIS BEING MY FIRST BUSINESS, I AM LEARNING AS I GO  
ALONG, BUT WILL NOT FORGET IT NEXT YEAR. THANK YOU AGAIN FOR ALL  
~~OF YOUR HELP AND IF YOU HAVE ANY QUESTIONS, PLEASE CALL AT.~~  
772-370-0934.

NIECOLE ANDERSON

PRESIDENT