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

FILED Jun 18, 2002 8:00 am Secretary of State

1. Entity Nam	MENI#/01000	085564		06-18-	2002 90484 027 ***158.75
475 ISSS	nderscare Law DO: NOT WRITE	The man and the second		0	ប្រឹប្សភិ
2. Principal P 1950 Suite, Apt. Suite, State	» D-T	3. Mailing Address Suite, Apt. #, etc. City & State	<u></u>	DO NOT WI	RITE IN THIS SPACE Applied For
5050	, , , , , , , , , , , , , , , , , , , 			651132530	
3424	Country	Zip .	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
			en ver	7. Name and Address of Curre	nt Registered Agent
	DO NOT WI		Name Me. Street Address 5043	(P.Q. Box Number is Not Accepta VRSSCT Lane	
			Cap 50.7	asata	FL 3547914 3
8. The above	e named entity submits this statement for	Pharine	registered office or register		6-10-02
	Signature, typed or princed name of registered agent a		Registered Agent signature require	d when reinstating)	DATE
9. This corpo Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	Jánuary 1 M After May Amended Make Check Payabi	Registered Agent signature require ay 1 Fee is \$150.00 1, Fee is \$550.00 UBR is \$61.25 le to Department of Sta	10. Election Campaign Trust Fund Contribu	Financing \$5.00 May Be
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9. This corporate in the street address city-st-zip time mame	oration is eligible to satisfy its Intangible requirement and elects to do so. OFFICERS AND I P-President Torae M. Chavez 5049 Vassar Ln. Saras ota, Fl. 3 S-secretary Melissa Chavez 5043 Vassar Lane	January 1 M. After May Amended Make Check Payabl	ay 1 Fee is \$150.00 1, Fee is \$550.00 1, Fee is \$550.00 1, UBR is \$61.25 1e to Department of State 11TILE MANE SIRET ADDRESS CITY ST ZIP	DO NOT	SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _

Hachment

Thunderscape Lawn Service Inc.

Bay West Business Center 1950 Northgate Blvd. D-7 Sarasota, FL 34234

E-Mail: thunderscape@comcast.net

Fax: (941) 355-5747

Phone: (941) 685-6802 or (941) 359-3771

June 10, 2002

Florida Dept. of State **Division of Corporations** 409 East Gaines Street Tallahassee, FL 32399

Re: Document # 01000085564

To Whom It May Concern:

I am writing to inform you that the required uniform business report was never received do to an incorrect address. I was just informed of this after speaking to a representative (Lynn) at 850-488-9000. I am now aware that we missed the deadline but was also informed that if I immediately send in all required information there will be no penalty. Lynn provided instructions on downloading these forms on the internet and advised that I send this letter with it.

If you need any additional information please contact me at the contact information above.

elissa L. Chariez

Sincerely,

Melissa Chavez