2002 UNIFORM BUSINESS REPORT (UBR)

Jul 15, 2002 8:00 am Secretary of State DOCUMENT # P01000096484 1. Entity Name 07-15-2002 90188 022 ***150.00 TURNER WREATHES & CHRISTMAS TREES, INC. Principal Place of Business Mailing Address 3168 NW 63RD STREET 3168 NW 63RD STREET **BOCA RATON FL 33496 BOCA RATON FL 33496** 2. Principal Place of Business 3. Mailing Address 2901 ChwT Hove Road, #257 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State -⊊ity & State 4. FE Number Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent KLEIN, JEFFREY G 980 NORTH FEDERAL HIGHWAY SUITE 406 **BOCA RATON FL 33432-2** 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 of registered agent and title if applicable (NOTE: Registered Agent signature 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$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 President TITLE Addition □ Change WILE, ANTHONY NAME ANTHONY NAME STREET ADDRESS 980 NORTH FEDERAL HIGHWAY SUITE 406 3168 NW STREET ADDRESS CITY-ST-7iP BOCA RATON FL 33432-2 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete · 🖸 Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIT/ F ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition

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 an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIE

FILED

561-241-508

Turner Wreaths & Christmas Trees, Inc.

"Fresh Canadian Wreaths & Christmas Trees"

fittalhment July 9 62 Lo. Deptartment of State FR: Anthony wile, Prosedent 60129008 I never received my original form 101 payments or I would have Paid it. I moved hore 1/2 years ago from larada and am infamilian with the System: I phoned today and someone at the 850-488-9000 number Said I should write you this and hopefully you would accept my payment of \$150 I appologie for this overeight.

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