

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90141 017 ***150.00

DOCUMENT # P02000018635

1. Entity Name
PERFECTION IRRIGATION, INC.



Principal Place of Business
3624 SW 7TH PL.
CAPE CORAL FL 33914

Mailing Address
3624 SW 7TH PL.
CAPE CORAL FL 33914



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

01-0612279

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GAGLIARDI, JOSEPHINE
6361 PRESIDENTIAL CT., STE. B
FT. MYERS FL 33919

Name

ALEXANDER SANTANA

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

3624 SW 7th PL

City

CAPE CORAL

FL

Zip Code

33914

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

Alexander Santana

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/14/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PV ☐ Delete
NAME SANTANA, MIGUEL ANGEL
STREET ADDRESS 3624 SW 7TH PL.
CITY-ST-ZIP CAPE CORAL FL 33914

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

TITLE ST ☐ Delete
NAME SANTANA, MARIA G
STREET ADDRESS 3624 SW 7TH PL.
CITY-ST-ZIP CAPE CORAL FL 33914

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

TITLE V ☐ Delete
NAME ALEXANDER SANTANA
STREET ADDRESS 3624 SW 7th PL
CITY-ST-ZIP CAPE CORAL, FL 33914

TITLE V ☐ Change ☒ Addition
NAME ALEXANDER SANTANA
STREET ADDRESS 3624 SW 7th PL
CITY-ST-ZIP CAPE CORAL, FL 33914

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
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Miguel A. Santana
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/03

Date

239-945-0389

Daytime Phone #

CR2E034 (10/02)