

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

02-27-2003 90134 009 ***150.00

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1. Entity Name
AMERISCAPE USA, INC.



Principal Place of Business
**633 N. FRANKLIN ST., STE. 510
TAMPA FL 33602**

Mailing Address
**633 N. FRANKLIN ST., STE. 510
TAMPA FL 33602**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3641966

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GANTHER, JAMES S
238 E. DAVIS BLVD., STE. 309
TAMPA FL 33606**

7. Name and Address of New Registered Agent

Name **Louis BREEDING**
Street Address (P.O. Box Number is Not Acceptable)
633 N. FRANKLIN ST
City **Suite 510**
City **TAMPA** FL **33602**

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

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

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☒ Change ☐ Addition
PRESIDENT	JOE CHIELINI	5504 LEONA ST	TAMPA FL 33629	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☒ Change ☐ Addition
VICE PRESIDENT	GARY RODRIGUEZ	12142 FRUITWOOD DRIVE	ROSEMEAD FL 33569	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☒ Change ☐ Addition
SECRETARY	HARLICE STRIBLING, JR.	1614 COBBLER DRIVE	WHTZ FL 33559	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☒ Change ☐ Addition
VICE PRESIDENT - OPERATIONS	ALEXIS RIVERA	5018 W. LONGFELLOW DR.	TAMPA FL 33629	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☒ Change ☐ Addition
TREASURER	LOUIS BREEDING	3613 LEONA ST	TAMPA FL 33629	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☒ Change ☐ Addition
VICE PRESIDENT - SALES	DAVID CALVERLEY	2603 PARKVIEW ST	TAMPA FL 33629	

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

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20034 (10/02)