7/21/2003-90134-043-\$150.00-\$150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SECRETARY OF STATE DIVISION OF CORPORATIONS P02000075237 DOCUMENT # 1. Entity Name 03 SEP -8 AM 8: 00 SCHEDULED MAINTENANCE & LAWN SERVICE. INC. Principal Place of Business Mailing Address 429 N.E. 73RD STREET 429 N.E. 73RD STREET MIAMI FL 33138 MIAMI FL 33138 2. Principal Place of Business
+300 Biscour 3. Mailing Address ٠O. SomSuite, Apt. #, etc Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 200 City & State City & State Applied Fo now Not Applicable Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROSENTHAL, KERRY E ESQ. Street Address (P.O. Box Number is Not Acceptable) 2875 N.E. 191ST STREET SUITE 500 **AVENTURA FL 33180** City Zip Code 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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fee: Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 nn e ☐ Change ☐ Addition TITLE Delete HICKS, SHEARL RAY NAME NAME CR2E034 429 N.E. 73RD STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33138 CITY-ST-ZIP TITLE D ☐ Delete TILE ☐ Addition GOFF, DURAE LYNN NAME NAME BW., SK.200 STREET ADDRESS 429 N.E. 73RD STREET STREET ADDRESS CITY-ST-ZIP" MIAMI FL 33138 CITY-ST-ZIP TITLE ☐ Delete TILLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TID F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with II other like empowered. OUII TOUS SIGNATURE: Daytime Phone #



7300 Biscayne Blvd., Suite 200 Miami, Florida 33138 Tel: 305-756-9007 Fax: 305-756-9011 scheduledmaintenance@irelandcleaning.com

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

To Whom It May Concern:

We never received any documentation regarding our Annual Report filing. I sent a letter attesting to this back in July and received the attached letter back saying that we are still required to pay the late fee. We contacted the Division of Corporations and explained the situation; they advised us to resend the letter attesting to the fact that we did not receive any notice. We are including a copy of the notice and a letter that was returned to us. As stated in the attached letter, \$150.00 was already received by the Department of State.

If you have any questions or concerns, please feel free to contact me at 305-756-9007.

Sincerely,

Durae Goff, President

Scheduled Maintenance & Lawn Service