

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

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91833 040 \*\*\*150.00

DOCUMENT # P02000107111

1. Entity Name

Debris Busters, Inc.



**DO NOT WRITE IN THIS SPACE**

**90130210**

2. Principal Place of Business

4611 South University Dr

3. Mailing Address

4611 South University Dr

Suite, Apt. #, etc.  
Suite 417

Suite, Apt. #, etc.  
Suite 417

DO NOT WRITE IN THIS SPACE

City & State  
Davie, FL

City & State  
Davie, FL

4. FEI Number  
14-1848249

Applied For  
Not Applicable

Zip  
33328

Country  
U.S.A.

Zip  
33328

Country  
U.S.A.

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Wayne Horwitz, C.P.A.

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

3511 West Commercial Boulevard

Suite 402

City

Fort Lauderdale

FL

Zip Code  
33309

**DO NOT WRITE  
IN THIS SPACE**

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)

4-29-03

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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-ST-ZIP

P/S/T/D

Frank, Lee G.

4611 South University Drive # 17  
Davie, FL 33328

TITLE  
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CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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

SIGNATURE

LEE G. FRANK

Date

4/30/03

Daytime Phone #

(954)  
2982099

CR2E034B (12/02)