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

DO NOT WRITE IN THIS SPACE



DOCUMENT # Po 2000 123496

J.T.P. House of Garden Maintenance, Inc.

03 SEP -2 PM 3:33

SECRETARY OF STATE TATI AHASSEE. FLORIDA

2. Principal Place of Business 9940 Broad Channel Rd Mailing Address 800023521048 10/02/03--01081--013 **150.00 Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Miami Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O.-Box Number-is Not-Acceptable) – 9940 Broad Channel 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS CR2E034B (12/01) TITLE President TITLE Jorma T. Pontanen 9940 Broad Channel Rd NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Mami, FL 33157 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby 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 on an attachment with an address, with all

TITLE

NAME

NAME

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP TITLE

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SIGNATURE:

TITLE

NAME

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LLL OFFICER OR DIRECTOR

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IN THIS SPACE

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J.T.P. House and Garden Maintenance, Inc.

9940 Broad Channel Road Miami, Florida 33157 (305) 232-7159

Florida Department of State Secretary of State Glenda E. Hood Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Doc# PO2000123496

Dear Ms. Hood:

Please be advised that this is the first time I am receiving this in the mail. I have enclosed the \$150.00 fee as per your instructions. I will not forget to mail this before May of 2004.

Thank you.

Sincerely,

Jorma-T. Poutanen, President -

JTP House and Garden Maintenance, Inc.

amd/JTP

cc: business file