

2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JAN 18 AM 9:57

DOCUMENT # P03000124885

1. Entity Name
HARPER LAWCARE & LANDSCAPE, INC.



Principal Place of Business
2020 28 ST SOUTH
ST PETERSBURG, FL 33712

Mailing Address
2020 28 ST SOUTH
ST PETERSBURG, FL 33712

REINSTATEMENT 05-06

2. Principal Place of Business
2032 28TH ST S
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 22252
Suite, Apt. #, etc.

City & State
ST. PETERSBURG FL
Zip 33712 Country

City & State
ST. PETERSBURG FL
Zip 33742 Country

10182005 REIN-P CR2E098 (6/04)

4. FEI Number 32-0066138 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARPER, VINCENT E.
2020 28 ST SOUTH
ST PETERSBURG, FL 33712

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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 Vincent E Harper

(NOTE: Registered Agent signature required when reinstating)

1-06-06

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE HARPER LAWCARE & LANDSCAPE INC
NAME
STREET ADDRESS 2020 28th St. So. St. Peter FL 33712
CITY-ST-ZIP

TITLE CEO
NAME Vincent E. Harper
STREET ADDRESS P.O. Box 22252
CITY-ST-ZIP St. Petersburg, FL 33742

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE HARPER LAWCARE & LANDSCAPE INC
NAME
STREET ADDRESS P.O. Box 22252 St Petersburg FL 33742
CITY-ST-ZIP

TITLE
NAME
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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: Vincent E Harper

10/31/05 727-410-6301

Date

Daytime Phone #