Sep 05, 2003 8:00 am Secretary of State

09-05-2003 90108 028 \*\*\*150.00

## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

Principal Place of Business

P93000018290

Mailing Address

IMPERIAL PROPERTY AND LAWN MAINTENANCE, INC



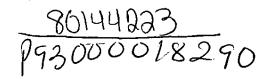
C/O GERRY SCHMITZ C/O GERRY SCHMITZ 357 IMPERIAL BOULEVARD 357 IMPERIAL BOULEVARD CAPE CANAVERAL FL 32920 CAPE CANAVERAL FL 32920 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-3178475 Not Applicable Country Zip Country Zip \$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 SCHMITZ, GERRY Street Address (P.O. Box Number is Not Acceptable) 357 IMPERIAL BOULEVARD CAPE CANAVERAL FL 32920 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 if 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 Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete Addition SCHMITZ, GERRY NAME NAME 357 IMPERIAL BLVD. STREET ADDRESS STREET ADDRESS CAPE CANAVERAL FL 32920 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 inclicated 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 trusted 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:

Daytime Phone #

## Affa Chment

Imperial Property and Lawn Maintenance, Inc. 357 Imperial Blvd. Cape Canaveral, FL. 32920



Sept. 1, 2003

Florida Dept. of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Gentlemen:

I am herewith submitting check # 1526, in the sum of \$150.00, for the annual filing fee for the Uniform Business Report for this corporation.

Please be advised that the original notice of filing was not received by us. The Postal Service has installed additional mail boxes in our complex, to accommodate new buildings. Unfortunately, many box numbers were duplicated in the process, and a significant amount of mail was misdirected, and even lost. The Uniform Business Report notice appears to have been but one of those lost items.

I have filed a complaint with the local postal service, and they are attempting to recover some of the lost mail, and correct the confusing delivery service.

I respectfully request that any late fees be waived, with respect to the filing of this report.

Sincerely,

G. Schmitz