2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000051709 1. Entity Name LANDCO III, INC.								Secretary of State 02-06-2002 90072 039 ***150.00							
Principal Plac 3200 N FEDER BOCA RATON	RAL HWY #12		Mailing Address 3200 N FEDERAL HWY #128 BOCA RATON FL 33431								1 1 111 61 111 11		. (1 11 11 (46 11 1	801 80 180	
2. Principal P 2220 Suite, Apt.	N D/	INSS IXIE HWY	3. Mailing Address 2270 N DIXIE HWY Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE								
City & State BOCA RATON, FL			City & State BOCA RATON, FL				4. FEI Number 65-0427557							plied For t Applicable	
Zip			Zip 33431	Zip Count									8.75 Additional se Required		
	6. Name	and Address of Current R	egistered Agent		Name		7. Nan	ne and A	ddress o	f New	Registere	ed Age	ent		
AEBERSOLD, ROBERT D 3200 N FEDERAL HWY #128 BOCA RATON FL 33431						ddress (P. 2 O	O. Box		is Not Ac X/E	ceptat <i>HL</i>	οle) υγ.				
					a S ^v	CA T	RAT	,on			F	·L	Zip Code	31	
SIGNATURE . 9. This corporate fax filing r	Signature, typed pration is elig	y submits this statement for the submits this statement for the submits of registered agent and elects to do so.	U Robe	Registere	d Agent signatures \$150.0 will be \$55	e berson seed with the seed of	then reinsta	ating)	on Camp Fund Co	aign F	/-/7			0 May Be to Fees	
11.		OFFICERS AND D	IRECTORS	12.			ADDIT	IONS/CI	HANGES	TO OF	FICERS A	ND DII	RECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		LD, ROBERT D EDERAL HWY #128 FON FL	☐ Delete	1	- 1		120 OCA	N RAT	DIX		μωγ, 334:] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		i								Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		i								Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete) Change	Addition	
ITTLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete										Change	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP			□ Delete		1								Change	Addition	

SIGNATURE: RELIGIO DE DEL COL RESETTO A CONTROL 1/17/2002 56/ 391-5057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Davime Phone #

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.