## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT 1998

2. Principal Place of Business

Suite, Apt #, etc

City & State

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Zıp



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000001195 (4) DOCUMENT #

U-C LANDSCAPING INC.

Principal Place of Business 12201 N.W. 35TH ST. CORAL SPRINGS FL 33065

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CORAL SPRINGS FL 33071

MURRAY, LAURENCE H 1535 NW 100 DR

Mailing Address

2a. Mailing Address

City & State

ZiD

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9. Name and Address of Current Registered Agent

Suite, Apt. #, etc.

1535 NW 100 DR CORAL SPGS FL 33071

**FILED** Apr 29 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/06/1994 4. FEI Number Applied For 65-0459868 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent

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

84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registored agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Country

81 Name

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Signation, typod or ponted name of registered agent and title diapplicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE MURRAY, LAURENCE H NAME 1.2 NAME 12201 N.W. 35TH ST. STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33085 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change ☐ Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 31 TITLE Change \_\_\_ Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 61 TITLE Addition NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. 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 annual report or supplication 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 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

6.4 CITY-ST-ZIP

SIGNATURE:

Laures V. Muner, 4/201

CR2E034