## **2001 UNIFORM BUSINESS REPORT (UBR)** Apr 19, 2001 8:00 am Secretary of State DOCUMENT # **P94000052995** 1. Entity Name AMERICAN EARTH FRIENDLY, INC. 04-19-2001 90007 025 \*\*\*150.00 Principal Place of Business Mailing Address 21610 GUADALAJOBA AVE 24610 GUADALAJOBA AVE BOCA BATON FL 33433 BOCA RATON TE 33433 2. Principal Place of Business 3. Mailing Address 12366 Pleasant Green Kloy DAME Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0538769 POYNTON Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 21610 GUADALAJARA AVE "BOGA RATON FL 33433"-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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE ☐ Delete HAZLETT, William L. TITLE NAME HAZLETT, WILLIAM L NAME 12366 Pleasant Green May 12366 Pleasant Green Way STREET ADDRESS 21610 GUADALAJAIZA AVE STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP ☐ Delete TITLE NAME HAZLETT, JOAN M. NAME STREET ADDRESS STREET ADDRESS 21610 GUADALAJARA AVE Bainton Beach, Fla. 33437 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** TITLE \_\_\_ Change ☐ Delete TITLE NAME . -NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME

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 suppliemental 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.

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

410/01 (561)131-3249
Date Daylime Phone #

☐ Change

Addition

CR2E034 (10)