

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90017 015 ***150.00

DOCUMENT # P94000078943

1. Entity Name
FLORIDA PARADISE LANDSCAPING, INC.

Principal Place of Business Mailing Address
16670 WESTWOOD LN 16670 WESTWOOD LN
FT LAUDERDALE FL 33326-1742 FT LAUDERDALE FL 33326-1742



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
606 Willombard Road *606 Willombard Road*

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
WESTON, Fla *WESTON, Fla*

Zip Country Zip Country
33327 *BROWARD* *33327* *BROWARD*

4. FEI Number **65-0528858** Applied For
 Not Applied For

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

6. Name and Address of Current Registered Agent

VIGOA, LUIS
16670 WESTWOOD LN
FT LAUDERDALE FL 33326-1742

7. Name and Address of New Registered Agent

Name *Luis Vigoa Sr*

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

City *WESTON* **FL** Zip Code *33327*

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.

SIGNATURE *Luis Vigoa Sr. Pres.* *Luis Vigoa Sr. Pres.* *1-13-2000*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PVPT	VIGOA, LUIS	16670 WESTWOOD LN	FT LAUDERDALE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	<i>Luis Vigoa Sr</i>	<i>606 Willombard Road</i>	<i>WESTON, Florida - 33327</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE: *Luis Vigoa Sr.* *Luis Vigoa Sr.* *1/13/2000* *(954) 389-5968*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #