

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90102 038 ***150.00

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

DOCUMENT # **P95000029710**
 1. Entity Name
EQUATOR LAWN & LANDSCAPING, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1823 N.W 141 Avenue Suite, Apt. #, etc.	3. Mailing Address P.O. BOX 823641 Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Pembroke Pines FL	City & State SOUTH FLORIDA FL	4. FEI Number 59-3312502	Applied For <input type="checkbox"/> Not Applicable
Zip 33028	Country U.S.A.	Zip 33082-3641	Country U.S.A.
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
 IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name RICHARD N. MARCH
Street Address (P.O. Box Number is Not Acceptable) 1823 N.W 141 AVENUE
City PEMBROKE PINES FL
Zip Code 33028

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/M/T RICHARD N. MARCH 1823 N.W 141 Avenue Pembroke Pines FL 33028	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard March* Date: 4/5/2002 **305-342-7039**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 954-602-1553

CR2E034B (12/01)