FOR COFIT CORPORATION OF THE PROPERTY (UBR) FILED DOCUMENT # P950000 50741 02 NOV 14 AM 11:48 Omega Building & Landscape Maintenance, Inc. SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 9222 Landscape Pi Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Land O Lakes, FI City & State 4. FEI Number Applied For 59-3326048 Zip 34639 Country Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE INNET IN THIS SPACE Zip Code 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible anuary 1 - May 1 Fee is \$150.00 Tax filing requirement and elects to do so. After May 1, Fee is \$550.00 10. Election Campaign Financing (See criteria on back) Amended UBR is \$61.25 \$5.00 May Be Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS TITLE President TITLE NAME Susan M. Kinney (12/01 NAME STREET ADDRESS 9222 Landscape Pl., Land O Lakes, Fl 34639 STREET ADDRESS CITY-ST-ZIP CR2E034B CITY-ST-ZIP HITLE TITLE NAME NAME STREET ADDRESS 400008686424 10/30/02--01015--003 **15 STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP THLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-S1-ZIP DO NOT WRITE CITY - ST- ZIP DILE TITLE-NAME IN THIS SPACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST. 7/F CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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, withall other like empowered.

Daylime Phone A

SIGNATURE:

"The End Of Your Lawn & Landscape Problems"

Division of Corporations 409 E. Gaines St. Tallahassee, Fl 32399

RE; Corporate Report

Enclosed is copy of last years report, I called May 24, 2002 and spoke to a woman, did not get her name. I told her we did not receive a form to file our report, She told me to send in a copy of last years with a check so I did.

Now last week our CPA called and said Check #3652 had not cleared our account. Now I am submitting all of the information again, it is enclosed.

When I talked the to the lady at your office I told he we had relocated home and business as of November 1999, the address on the old form is, 1307 Bogie Dr., Tampa, Fl 33612, Our new Address is 9222 Landscape Pl, Land O Lakes, Fl 34639

I thank you for your and pray for your understanding in this matter.

Sincerely

Susan M. Kinney