

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000085691

1. Entity Name

JM LANDSCAPING, CORP.

Principal Place of Business

Mailing Address

5851 HOLMBERG RD
#2411
PARKLAND FL 33067

5851 HOLMBERG RD
#2411
PARKLAND FL 33067-4538

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0180762

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GILL, STANLEY C III
1344 NW 80TH TERRACE
PLANTATION FL 33322

NEW ADDRESS
OF CURRENT
(ORIGINAL) AGENT

Name GILL, STANLEY C II

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

5851 HOLMBERG RD # 2411

City PARKLAND

FL

Zip Code 33067

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

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)

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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.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME GILL, STANLEY C II
STREET ADDRESS 1344 NW 80TH TERRACE
CITY-ST-ZIP PLANTATION FL 33322

☐ Delete

NEW ADDRESS

TITLE D
NAME GILL, STANLEY C II
STREET ADDRESS 5851 HOLMBERG RD #2411
CITY-ST-ZIP PARKLAND, FL 33067

☐ Change

☐ Add

TITLE
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STREET ADDRESS
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☐ Change

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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 Block 12 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stanley C. Gill II STANLEY C. GILL II

1/5/00 954-340-9389

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #