

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000095237

1. Entity Name

LAND LOVERS DESIGN & MAINTENANCE, INC.

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90002 037 ***150.00

Principal Place of Business

12330 SW 132ND CT
MIAMI FL 33186
US

Mailing Address

12330 SW 132ND CT
MIAMI FL 33186
US

818865



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15000 S.W. 200 ST.

3. Mailing Address

15000 S.W. 200 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0642263

Applied For

Not Applicable

Zip

33187

Country

Zip

33187

Country

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

STALZER, RUSSELL
7531 S.W. 157 COURT
MIAMI FL 33193

Name STALZER, RUSSELL

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

15000 S.W. 200 ST.

City

Miami

FL

Zip Code

33187

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME PTD
STALZER, RUSSELL
STREET ADDRESS 7531 S.W. 157 COURT
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE NAME
STREET ADDRESS 15000 S.W. 200 ST
CITY-ST-ZIP Miami FL 33187 ☒ Change ☐ Addition

TITLE NAME VS
STALZER, IVETTE
STREET ADDRESS 7531 SW 157 CT
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE NAME
STREET ADDRESS 15000 S.W. 200 ST
CITY-ST-ZIP Miami FL 33187 ☒ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0237854