

Amendment of UBR Report

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000012173

1. Entity Name

WEST LAWN LANDSCAPE SERVICE, INC

Principal Place of Business **Mailing Address**

228 S.E. 7TH AVE 228 S.E. 7TH AVE
DEERFIELD BCH FL 33441 DEERFIELD BCH FL 33441

FILED

03 OCT -3 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000023550550
10/03/03--01084--002 **61.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **3. Mailing Address**

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

21013 COUNTRY CREEK DR 21013 COUNTRY CREEK DR.

City & State **City & State**

BOCA RATON FL BOCA RATON FL

Zip **Country** **Zip** **Country**

33428 PALM BCH 33428 PALM BCH

4. FEI Number **Applied For**

65-0706219 ☐ Not Applicable

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

☐ ☐

6. Name and Address of Current Registered Agent

OLIVEIRA, HEDNILSON
228 S.E. 7TH AVE
DEERFIELD BEACH FL 33441

7. Name and Address of New Registered Agent

Name
DE MORAIS, JULIO

Street Address (P.O. Box Number is Not Acceptable)
21013 COUNTRY CREEK DRIVE

City **FL** **Zip Code**
BOCA RATON 33428

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 *Julio De Moraes* **DE MORAIS, JULIO** **09-25-2003**

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. **FILE NOW!!! FEE IS \$150.00** **10. Election Campaign Financing Trust Fund Contribution.** **\$5.00 May Be Added to Fees**

(See criteria on back) ☐ **After MAY 1, 2001 Fee will be \$550.00** ☐ **Make Check Payable to Department of State**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input checked="" type="checkbox"/> Delete OLIVEIRA, HEDNILSON 228 S.E. 7TH AVE DEERFIELD BEACH FL 33441	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PRESIDENT DE MORAIS, JULIO 21013 COUNTRY CREEK DRIVE BOCA RATON FL 33428
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VICE PRESIDENT DACUNNHA, CELSO 21013 COUNTRY CREEK DRIVE BOCA RATON FL 33428
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Julio De Moraes* **DE MORAIS, JULIO** **09-23-03 954-275-7021**

Signature and typed or printed name of signing officer or director Date Daytime Phone #