## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P96000066914 DOCUMENT #

1. Entity Name

TONY & DANNY LANDSCAPING, INC.



May 01, 2003 8:00 am Secretary of State 05-01-2003 90414 015 \*\*\*150.00

FILED

Principal Pla	ace of Bu	siness
2312 CORAL	SPRINGS	DRIV
CORAL SPRI	MGS EL 1	22065

2. Principal Place of Business

Mailing Address

P O BOX 8265

3. Mailing Address

Suite, Apt. #, etc.

CORAL SPRINGS FL 33065



CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc. 9815 NW 57 MANOR City & State CORAL SPRINGS - FL 076 6. Name and Address of Current Registered Agent

BROWARD

City & State

Country

4. FEI Number

65-0692783

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required 7. Name and Address of New Registered Agent

SERGA, GUSTAVO 2314 CORAL SPRINGS DRIVE **CORAL SPRINGS FL 33065** 

SERGA GUSTAVO

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

9815 NW57 MANOR

City CORAL SPRINGS

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

ile to Florida Department of State Make Che OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Delete TITLE TITLE ☐ Addition SEREA GUSTAVO SERGA, GUSTAVO NAME NAME 9815 NW 57 MANOR STREET ADDRESS 2314 CORAL SPRINGS DRIVE STREET ADDRESS CORAL SPRINGS- FL- 33076 CITY-ST-ZIP **CORAL SPRINGS FL 33065** CITY-ST-ZIP ☐ Change TITLÈ Addition TITLE Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP T(T) F ☐ Delete TITL F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4-28-03 954-752-9419