## **2003 FOR PROFIT CORPORATION**

## Sep 04, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR P97000032427 **DOCUMENT #** 1. Entity Name 09-04-2003 90058 039 \*\*\*150.00 BIG LEAGUE LAWN SERVICE, INC. Mailing Address Principal Place of Business 15508 WALDEN AVENUE 15508 WALDEN AVENUE **TAMPA FL 33618 TAMPA FL 33618** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3490240 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent COWART, MARK Street Address (P.O. Box Number is Not Acceptable) 15508 WALDEN AVE **TAMPA FL 33618** Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE 1S \$550.00 \$5.00 May Be 9. Election Campaign Financing After September 10, 2003 Fee will be \$750.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Addition TITLE ☐ Change TITLE Delete COWART, MARK NAME NAME 15508 WALDEN AVE STREET ADDRESS STREET ADDRESS **TAMPA FL 33618** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITI F NAME

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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,

CITY-ST-ZIP

SIGNATURE:

## Michael A. Knox, CPA, P.A.

Attachment 86143362

Michael A. Knox, CPA, CVA 701 South Howard Ave., Suite 203 Tampa, FL 33606

813.690.0522 813.258.2880 Fax michaelknoxcpa@aol.com

August 11, 2003

Secretary of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re:

Big League Lawn Service, Inc.)
Document # P97000032427

Enclosed you will find a check for \$150.00, and a sign copy of the Uniform Business Report for the above mentioned corporation. The reason that the report was not filed on time was because we never received the original notice. Based on this fact we are formally requesting an abatement of all penalties & requesting that this corporation be reinstated.

Thanking you in advance for your cooperation with this matter.

Sincerely,

Michael A. Knox,

Certified Public Accountant, Certified Valuation Analyst

