

2002 UNIFORM REGISTRATION (VBR)
DOCUMENT #

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90100 001 ***300.00

1. NAME **P97000055834** ✓

NET EARTH, INC

| | | | |
|--|---------|--|---------|
| 2. Principal Place of Business 217 E CAKEWORTH AVE | | 3. Mailing Address 217 E CAKEWORTH AVE | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State LANTANA FL | | City & State LANTANA FL | |
| Zip 33462 | Country | Zip 33462 | Country |

DO NOT WRITE IN THIS SPACE

Applied For
Not Applicable

Additional
Fees

FEE NUMBER

65-0779920

Address (P.)

Busch, STACEY
217 E CAKEWORTH AVE
LANTANA FL 33462

FL

Zip Code

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, 2002 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

☐ Change ☐ Addition

| | |
|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST- D - Busch, Howard 217 E CAKEWORTH AVE LANTANA FL 33462 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP D - BILICIC, TOSRA 1573 SOUTHWEST FACULTY COURT LANSINGVILLE FL 33482 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
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CR2E034 (9/01)

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: ✓ **Stacey Busch**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #