## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P97000107608 1. Entity Name EASY CUT LAWN CARE SERVICES. INC. Principal Place of Business Mailing Address NEW YORK ST 2166 NEW YORK ST ... MELBOURNE FL 32904 WEST MELBOURNE FL 32904-6224 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

SHORT, RAYMOND E

**WEST MELBOURNE FL 32904** 

9. This corporation is eligible to satisfy its Intangible

SHORT, RAYMOND E

WEST MELBOURNE FL 32904

2166 NEW YORK ST

Tax filing requirement and elects to do so.

(See criteria on back)

**PVST** 

2166 NEW YORK ST

SIGNATURE

11.

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

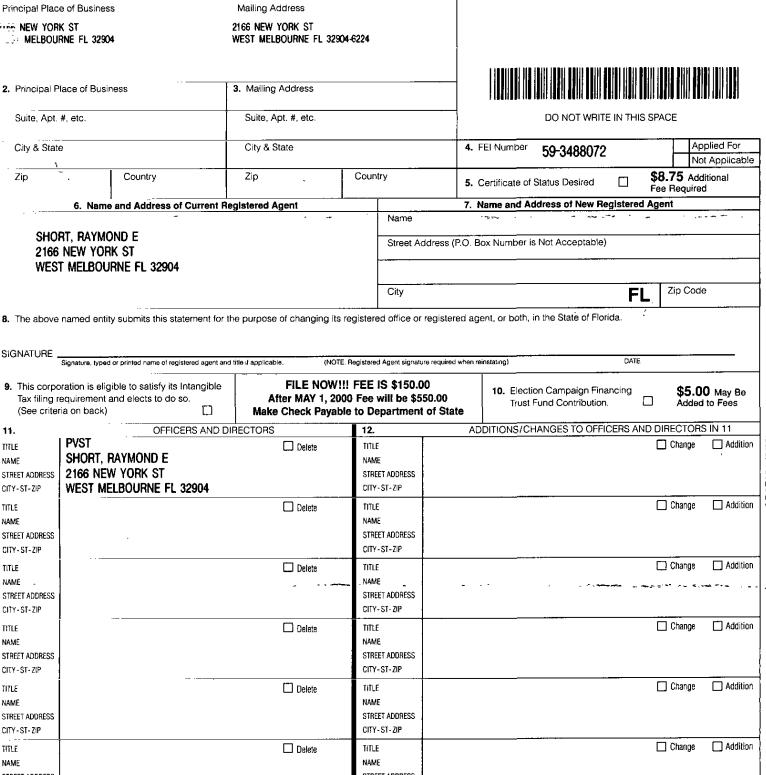
CITY-ST-ZIP

NAME

CITY-ST-ZIP

## May 04, 2000 8:00 am Secretary of State

05-04-2000 90093 042 \*\*\*150.00



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 agreequired 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 any owered.

Name

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR