

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90056 012 ***150.00

DOCUMENT # P98000010308

1. Entity Name

FERTILIZERS ONLINE, INC.

Principal Place of Business

**585 SANCTUARY DRIVE #401B
LONGBOAT KEY FL 34228**

Mailing Address

**585 SANCTUARY DRIVE #401B
LONGBOAT KEY FL 34228**

2. Principal Place of Business

1305 E. Venice Ave

Suite, Apt. #, etc.

3. Mailing Address

PO Box 673

Suite, Apt. #, etc.

City & State

Venice Florida

Zip

34292

Country

USA

City & State

Venice, Florida

Zip

34284

Country

USA

4. FEI Number

65-0817525

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ZAHR, SAMEER Y
585 SANCTUARY DRIVE #401B
LONGBOAT KEY FL 34228**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 _____

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

TITLE **D** ☐ Delete
NAME **ZAHR, SAMEER Y**
STREET ADDRESS **585 SANCTUARY DRIVE #401B**
CITY-ST-ZIP **LONGBOAT KEY FL 34228**

TITLE **VP** ☐ Delete
NAME **PAEROW, RICHARD**
STREET ADDRESS **P O BOX 673**
CITY-ST-ZIP **VENICE FL 34284**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Richard Paerow**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02 **941-485-4369**
Date Daytime Phone #

CR2E034 (9/01)