

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000060711

1. Entity Name

SIMON'S LANDSCAPING, INC

FILED
Aug 08, 2001 8:00 am
Secretary of State

08-08-2001 90007 033 ***150.00

Principal Place of Business

Mailing Address

10218 SLEEPY BROOK WAY
 BOCA RATON FL 33428

SAME

B0061668

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0852890

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ST. JEAN SIMON

10218 SLEEPY BROOK WAY

BOCA RATON FL 33428

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, 2001 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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

PSTD
 ST. JEAN, Simon
 10218 SLEEPY BROOK WAY
 BOCA RATON FL 33428

☐ Delete

TITLE
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☐ Change ☐ Addition

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:

Simon St Jean

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6-3-01

Daytime Phone #

CR2E034 (11/00)

SIMON'S LANDSCAPING, INC
10218 SLEEPY BROOK WAY
BOCA RATON, FL 33428

attachment
D# P98000060711
B00010008

REF#P98000060711
UNIFORM BUSINESS REPORT

DEAR: SIR/MADAM

PLEASE BE ADVISED THAT I DID NOT RECEIVE THE 2001 PREPRINTED
UNIFORM BUSINESS REPORT. I REQUESTED BLANK FORM WHICH I
RECEIVED LATE . ENCLOSED PLEASE FIND THE 2001 REPORT WITH A
CHECK FOR \$150.00 . PLEASE ACCEPT THIS CHECK AS A FULL PAYMENT
FOR THE REPORT.

THANK YOU IN ADVANCE FOR YOUR COOPERATION IN THIS MATTER.

SINSERELY YOURS


SIMON ST. JEAN
PRESIDENT