

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000002965

1. Entity Name

J'S LANDSCAPING, INC.

Principal Place of Business

2101 NW 3RD CT.
BOCA RATON FL 33431

Mailing Address

2101 NW 3RD CT.
BOCA RATON FL 33431

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0896311

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CONRAD, BENJAMIN A
2101 NE 3RD CT
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

CONRAD, BENJAMIN A

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

2101 NW 3RD CT

City

BOCA RATON FL

FL

Zip Code

33431

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 BENJAMIN A CONRAD PCOO

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

(NOTE: Registered Agent signature required when reinstating)

3-16-2001

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

TITLE PCOO
NAME CONRAD, BENJAMIN A
STREET ADDRESS 2101 NW 3RD ST
CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

TITLE T
NAME CONRAD, ALBERT J
STREET ADDRESS 2101 NW 3RD CT
CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

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

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 V/T
NAME CONRAD, ALBERT J.
STREET ADDRESS 2101 NW 3RD CT
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Change ☐ Addition

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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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: ALBERT J CONRAD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-2001

Date

561-392-2013

Daytime Phone #

0299584

CR2E034 (10/00)

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90074 013 ***158.75

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DO NOT WRITE IN THIS SPACE