

2008

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90006 041 ***150.00

DOCUMENT #

P99000016293

1. Entity Name

JOHN'S PLANT SHOP, INC.



DO NOT WRITE IN THIS SPACE

40054282

2. Principal Place of Business

5050 PETERS ROAD

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PLANTATION, FL

City & State

4. FEI Number

65-0905706

Applied For

Not Applicable

Zip

33317

Country

BROWARD

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JOHN WNUKOWSKI

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

5050 PETERS ROAD

City

PLANTATION

FL

Zip Code

33317

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

MAR 25 2008

Signature of the registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT/DIRECTOR
JOHN WNUKOWSKI
5050 PETERS ROAD
PLANTATION, FL 33317

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE-PRES./ DIRECTOR
IRENE WNUKOWSKI
5050 PETERS ROAD
PLANTATION, FL 33317

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SEC'T / TREASURER
EDWARD WNUKOWSKI
5181 SW 14th COURT
PLANTATION, FL 33317

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DO NOT WRITE
IN THIS SPACE

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12. 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 10 or on an attachment with an address, with all other like empowered.

JOHN WNUKOWSKI PRES.

MAR 25 2008

954-587 - 4477

SIGNATURE:

CP250345 11/2/02