

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

2009

FILED

09 MAY 18 AM 8:12

2009

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P99000016293  
**Entity Name**  
JOHN'S PLANT SHOP, INC.

**DO NOT WRITE IN THIS SPACE**

<b>Principal Place of Business</b> 5050 PETERS ROAD Suite, Apt. #, Etc.		<b>3. Mailing Address</b> Suite, Apt. #, etc.	
<b>City &amp; State</b> PLANTATION, FL 33317		<b>City &amp; State</b>	
<b>Zip</b>	<b>Country</b> BROWARD	<b>Zip</b>	<b>Country</b>

DO NOT WRITE IN THIS SPACE

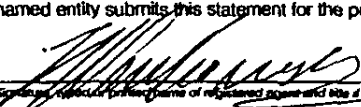
<b>4. FEI Number</b> 65-0905706	<b>Applied For</b> <input type="checkbox"/> Not Applicable
------------------------------------	---

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

<b>7. Name and Address of Current Registered Agent</b>	
<b>Name</b> JOHN WNUKOWSKI	
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 5050 PETERS ROAD	
<b>City</b> PLANTATION	<b>Zip Code</b> FL 33317

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**  **DATE** APR 24 2009  
(NOTE: Registered Agent signature required when reappointing)

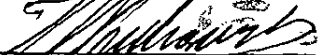
**1. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.** ☐  
(See criteria on back)

January 1: Fee is \$150.00  
After May 1: Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

**10. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00 May Be Added to Fees**

1. OFFICERS AND DIRECTORS	
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>	<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-STATE-ZIP</b>
PRESIDENT / DIRECTOR JOHN WNUKOWSKI 5050 PETERS ROAD PLANTATION, FL 33317	DO NOT WRITE IN THIS SPACE
VICE-PRESIDENT / DIRECTOR IRENE WNUKOWSKI 5050 PETERS ROAD PLANTATION, FL 33317	DO NOT WRITE IN THIS SPACE
SECT / TREASURER EDWARD WNUKOWSKI 5181 SW 14th COURT PLANTATION, FL 33317	DO NOT WRITE IN THIS SPACE
	DO NOT WRITE IN THIS SPACE
	DO NOT WRITE IN THIS SPACE
	DO NOT WRITE IN THIS SPACE

**3. 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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:** JOHN WNUKOWSKI  954-587-4477 **DATE** APR 24 2009  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)