

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000052838

1. Entity Name

GREEN SPIRIT, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90391 009 ***158.75

Principal Place of Business

4949 CASON COVE DR. #722
ORLANDO FL 32811

Mailing Address

4949 CASON COVE DR. #722
ORLANDO FL 32811-6386

2. Principal Place of Business

3331 S. KIRKMAN RD

3. Mailing Address

P.O. Box 617415

Suite, Apt. #, etc.

522

Suite, Apt. #, etc.

City & State

ORLANDO FL 32811

City & State

ORLANDO FL

4. FEI Number

593-43 1011

Applied For

Not Applicable

Zip

32811

Country

USA

Zip

32861-7415

Country

U.S.A.

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

CANCHOLA, RICARDO
4949 CASON COVE DR, #722
ORLANDO FL 32811

Name

CANCHOLA, RICARDO

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

3331 S. KIRKMAN RD APT 522

City

ORLANDO

FL

Zip Code

32811

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 RICARDO CANCHOLA, PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

APRIL 27 2000

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, 2000 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 D ☐ Delete
NAME CANCHOLA, RICARDO
STREET ADDRESS 4949 CASON COVE DR, #722
CITY-ST-ZIP ORLANDO FL 32811

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

TITLE D ☐ Delete
NAME CANCHOLA, MELANIE
STREET ADDRESS 4949 CASON COVE DR, #722
CITY-ST-ZIP ORLANDO FL 32811

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

TITLE D ☐ Delete
NAME CANCHOLA, EDUARDO
STREET ADDRESS 4949 CASON COVE DR, #722
CITY-ST-ZIP ORLANDO FL 32811

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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CITY-ST-ZIP

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:

SIGNATURE: RICARDO CANCHOLA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 27, 2000 (407) 648 9994

Date

Daytime Phone #

CR2E034 (9/99)