FILED
Jul 05, 2001 8:00 am
Secretary of State
07-05-2001 90006 013 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000055422

1. Entity Name

MAIN LANDSCAPING, INC. (LA)

Principal Place of Business	Mailing Address
3007 HERON PLACE CLEARWATER, FL. 33762	3007 HERON PLACE CLEARWATER, FL. 33762

[redacted]

A0075889

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6567 HILLSIDE AVE	6567 HILLSIDE AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SEMINOLE, FL.	City & State: SEMINOLE, FL.
Zip: 33772 Country:	Zip: 33772 Country:

4. FEI Number: 59-3582480 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

AVILA, HELEN H
3007 HERON PLACE
CLEARWATER, FL. 33762

7. Name and Address of New Registered Agent

Name: AVILA, GABRIEL R
Street Address (P.O. Box Number is Not Acceptable): 6567 HILLSIDE AVE.
City: SEMINOLE FL Zip Code: 33772

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: X Gabriel Avila GABRIEL R. AVILA, PRES
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when submitting) 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 $400.00
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	D AVILA, GABRIEL R 3007 HERON PLACE CLEARWATER, FL. 33762	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AVILA, GABRIEL R. 6567 HILLSIDE AVE. SEMINOLE, FL. 33772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AVILA, HELEN H. 3007 HERON PLACE CLEARWATER, FL. 33762	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

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: X Gabriel R Avila GABRIEL R. AVILA, PRESIDENT 727-394-1131
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR Date Daytime Phone #