FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jun 15, 2001 8:00 am Secretary of State DOGUMENT # REGUDO DO 592 +. G. MYOR LANDS PAPES FIX. 06-15-2001 90171 044 ***150.00 Mailing Address Principal Place of Business X417 DEC PRADO BUD. A0073457 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 59-2809553 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRANK MADR 1417 Del Prado Blad \$108 Street Address (P.O. Box Number is Not Acceptable) Cape Come PL 339.90 Zip Code City 8. The above gamed entity submits this/statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOWIN PEE 19 \$150:00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. -Trust Fund Contribution.-Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE ☐ Addition NAME DEL PRODOBLED # 108 NAME STREET ADDRESS STREET ADDRESS CLTY-ST-ZIP CITY-ST-ZIP ADE COPICAL FL. 33990 TETT F Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Addition TIFLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZE TITLE TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP 13. I hereby certify that the information supplied with this filipp 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 said 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 others like empowered.

Dagarothyces

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Altachment A0073457



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

May 25, 2001

F. G. MAJOR LANDSCAPES, INC. 1417 DEL PRADO BLVD., STE 108 CAPE CORAL, FL 33990

SUBJECT: F. G. MAJOR LANDSCAPES, INC. Ref. Number: P99000059215

Please be advised, we have received your annual report/uniform business report for the above corporation; however, the report <u>has not been filed</u> and a copy is being returned for the following:

There is not a registered agent designated on the report. Please enter the current registered agent's name and Florida street address. If this is a change from the registered agent previously filed with this office, the new agent must sign accepting the designation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT—TO:—DIVISION—OF—CORPORATIONS,—P.O.—BOX—1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Stacy Prather Document Specialist

Letter Number: 301A00032388