

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000074156

*1. Entity Name

DYNASERV NURSERIES, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90153 011 ***150.00

Principal Place of Business

990 S. FLAMINGO ROAD
DAVIE FL 33325

Mailing Address

990 S. FLAMINGO ROAD
DAVIE FL 33325-4404

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

2001 Tonnelle Avenue

Suite, Apt. #, etc.

City & State

City & State

North Bergen, New Jersey

Zip

Country

Zip

07047

Country

4. FEI Number

65-0952791

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KLEIMAN, M. SCOTT
7320 GRIFFIN ROAD, SUITE 109
DAVIE FL 33314

7. Name and Address of New Registered Agent

Name John Reed

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

990 S. Flamingo Road

City

Davie

FL

Zip Code

33325

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

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

(NOTE: Registered Agent signature required when reinstating)

3/20/00

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

TITLE D ☐ Delete
NAME SIROTKIN, JOSEPH
STREET ADDRESS 990 S. FLAMINGO ROAD
CITY-ST-ZIP DAVIE FL 33325

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Chairman ☒ Change ☐ Addition
NAME Sirotkin, Joseph
STREET ADDRESS 16331 Vintage Oak Lane
CITY-ST-ZIP Delray Beach, FL 33484

TITLE President ☐ Change ☒ Addition
NAME Atkinson, Ronald W.
STREET ADDRESS 58 Tingley Lane
CITY-ST-ZIP Edison, New Jersey 08820

TITLE Secretary ☐ Change ☒ Addition
NAME Alvarado, Lillian
STREET ADDRESS 21 Etheridge Drive
CITY-ST-ZIP Carteret, New Jersey 07008

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Lillian Alvarado

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/00

Date

(201) 330-7700

Daytime Phone #