

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000081264

FILED  
Apr 26, 2003  
Secretary of State

Entity Name: PEPINIERE BONSAI NURSERY COMPANY

## Current Principal Place of Business:

1720 N.W. 118TH AVENUE  
PEMBROKE PINES, FL 33122

## New Principal Place of Business:

1720 N.W. 118TH AVENUE  
PEMBROKE PINES, FL 33026

## Current Mailing Address:

1720 N.W. 118TH AVENUE  
PEMBROKE PINES, FL 33122

## New Mailing Address:

1720 N.W. 118TH AVENUE  
PEMBROKE PINES, FL 33026

FEI Number: 65-0955837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, MICHELLE  
1720 N.W. 118TH AVENUE  
PEMBROKE PINES, FL 33122

## Name and Address of New Registered Agent:

LOPEZ, MICHELLE  
1720 N.W. 118TH AVENUE  
PEMBROKE PINES, FL 33026

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: MICHELLE LOPEZ

04/26/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CHARLAND, DANIEL PRES  
Address: 1720 N.W. 118TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: VSD ( ) Delete  
Name: LOPEZ, MICHELLE L V. PRES  
Address: 1720 N.W. 118TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33122 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VSD (X) Change ( ) Addition  
Name: LOPEZ, MICHELLE L V. PRES  
Address: 1720 N.W. 118TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33026 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE LOPEZ

VSD

04/26/2003

Electronic Signature of Signing Officer or Director

Date