

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90042 006 ***150.00

DOCUMENT # V18516

1. Entity Name
RICARDO LORENZO LAWN SERVICE CORP.

| | |
|--|--|
| Principal Place of Business 8962 N.W. 145 LANE MIAMI FL 33018 US MIAMI LAKES, FL 33018 | Mailing Address 8962 NW 145 LANE MIAMI FL 33018 US MIAMI LAKES, FL 33018 |
|--|--|



DO NOT WRITE IN THIS SPACE

| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

| | |
|---|--|
| 4. FEI Number 65-0322533 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent
LORENZO, RICARDO
8962 N.W. 145 LANE
MIAMI FL 33018
MIAMI LAKES

7. Name and Address of New Registered Agent

| |
|--|
| Name |
| Street Address (P.O. Box Number is Not Acceptable) |
| City |
| State FL Zip Code |

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$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 | P | <input type="checkbox"/> Delete |
| NAME | LORENZO, RICARDO | |
| STREET ADDRESS | 8962 NW 145TH LANE | |
| CITY-ST-ZIP | MIAMI FL 33018 MIAMI LAKES, FL 33018 | |
| TITLE | T | <input type="checkbox"/> Delete |
| NAME | LORENZO, BLANCA | |
| STREET ADDRESS | 8962 NW 145 LANE | |
| CITY-ST-ZIP | MIAMI FL 33018 MIAMI LAKES, FL 33018 | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|--|---|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: *Ricardo Lorenzo*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **3/23/01** Daytime Phone #: **(305) 558-3255**

CR2E034 (10/00)