

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90069 037 ***150.00

DOCUMENT # **P96000046921**
1. Entity Name
Quality Lawn & Landscape, Inc.

Principal Place of Business Mailing Address
Boca Raton, FL **19236 Bay Leaf Ct.**
Boca Raton, FL 33498

957114

Principal Place of Business 3. Mailing Address
19236 Bay Leaf Ct. **~Same~**
Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

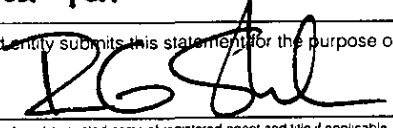
City & State City & State
Boca Raton, FL
Zip Country Zip Country
33498 USA

4. FEI Number Applied For
65-0675650 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
Robert G. Skarecki, Sr.
19236 Bay Leaf Ct.
Boca Raton, FL 33498

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City 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 **4/27/00**
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, 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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert G. Skarecki, Sr.	NAME	
STREET ADDRESS	19236 Bay Leaf Ct.	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33498	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Secretary & Treasurer Mary K. Skarecki	NAME	
STREET ADDRESS	19236 Bay Leaf Ct.	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33498	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice President Ralph V. Skarecki	NAME	
STREET ADDRESS	19236 Bay Leaf Ct.	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33498	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice President Nicholas A. Skarecki	NAME	
STREET ADDRESS	19236 Bay Leaf Ct.	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33498	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice President Robert G. Skarecki, JR.	NAME	
STREET ADDRESS	19236 Bay Leaf Ct.	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33498	CITY-ST-ZIP	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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CITY-ST-ZIP	
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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: 

4/27/00

CR2E034 (9/99)