FILE NOW: FILING FEE AFTER MAY 1 IS \$550,00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT IOF STATE

Sandra B. Mortham

Secretary of State

Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # 640582 (3)DIAZ LANDSCAPING & NURSERY, INC. Principal Place of Business Mailing Address 23705 SW 117TH AVE. 23705 SW 117TH AVE. MIAMI FL 33032 MIAMI FL 33032-3011 3. Date Incorporated or Qualified 3a. Date of Last Report 08/24/1979 05/01/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1967009 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agen **B**1 Name EMILIA DIAZ-FOX DIAZ. NICHOLAS R. 23705 SW 117TH AVE. Street Address (P.O. Box Number 18 Not Acceptable)
150 WEST FLAGLER 5 82 MIAMI FL 33032 **B3** SUITE 1575 - MUSEUM 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familian and applications of the corporation of 4-25-97 SIGNATURE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND D 12. IS AND D 13. DELETE X Change Addition HILF DP 11 TITLE DIAZ, MANUEL NAME DIAZ, MANUEL 1.2 NAME 2501 S.W. 62ND AVE. 23705 S.W. 117TH AVENUE 1.3 STREET ADDRESS STREET ADORESS HOMESTEAD, FLORIDA MIAMI FL 1.4 CITY - ST- ZIP CITY-ST Change DELETE Addition 2.1 TITLE DST TITLE DST DIAZ, EMILIA F. DIAZ, EMILIA F. 2.2 NAME 23705 S.W. 117TH AVENUE 2501 S.W. 62ND AVE. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP HOMESTEAD, FLORIDA 33032 CITY - ST - ZIP Change DELETE 3.1 TITLE Addition 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE 4.1 TITLE Change Addition THLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY: ST-ZIP CITY - S1 - ZIE DELETE ☐ Change Addition TITLE 5.1 TITLE 5.2 NAMÉ NAME 5 3 STREET ADDRESS \$1REET ADDRESS CHY-ST-ZiF 54 CITY (ST-ZIP Addition DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the hough report is true and acqurate and that my signature shall have the same legal effect as if made under oath; that

you provided the execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this annual report or supplymental at am an officer or director of the corporation or lie eceiver. appears in Block 12 or Block 13 if changed

6.4 CITY ST-ZIP

SIGNATURE:

Crity - S1 - ZIP

SIGNATURE AND TYPED

FILED

May 05 1997 8:00am