

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000081706

FILED
Apr 10, 2004
Secretary of State

Entity Name: DEPENDABLE LAWN SERVICE INC.

Current Principal Place of Business:

8527 YARLING DRIVE
LAKE WORTH, FL 33467

New Principal Place of Business:

8527 YEARLING DRIVE
LAKE WORTH, FL 33467

Current Mailing Address:

8527 YARLING DRIVE
LAKE WORTH, FL 33467

New Mailing Address:

8527 YEARLING DRIVE
LAKE WORTH, FL 33467

FEI Number: 65-1139507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOWAK, BRIAN
8527 YARLING DRIVE
LAKE WORTH, FL 33467

Name and Address of New Registered Agent:

NOWAK, BRIAN
8527 YEARLING DRIVE
LAKE WORTH, FL 33467

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: BRIAN NOWAK

04/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NOWAK, BRIAN
Address: 8527 YARLING DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: STD () Delete
Name: NOWAK, SINA
Address: 8527 YARLING DRIVE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NOWAK, BRIAN
Address: 8527 YEARLING DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: STD (X) Change () Addition
Name: NOWAK, SINA
Address: 8527 YEARLING DRIVE
City-St-Zip: LAKE WORTH, FL 33467

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: BRIAN NOWAK

PD

04/10/2004

Electronic Signature of Signing Officer or Director

Date