## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**19**98

DOCUMENT # P97000073709 (2)

RAMON'S LAWN CARE, INC.

Principal Place of Business

Mailing Address

## FILED Apr 24 1998 8:00am Secretary of State



1328 11TH STREET WEST BRADENTON FL 34205		1328 11TH STREET WEST Bradenton FL 34205		DO NOT WRITE IN THIS SPACE
1				3. Date Incorporated or Qualified 08/26/1997
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26		65.07 6642 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & Sta		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yo No
	9, Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent
AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134			81 Name 82 Street 83	Address (P. O. Box Number is Not Address (P. O. Box Number is Not Address to be )
	•		84 City (	2mdenton FL 85 74 5000
11. Pursuan office or agent. I	t to the provisions of Sections 607.0 registered agent, or both, in the Sta am tamiliar with, and accept the ob-	502 and 607,1508, Florida Statute of Florida, Such change was igations of Section 607,0505, F	utes, the above-named s authorized by the cor lorida Statutes.	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature typed or printed name of registered	シー		
12.		ND DIRECTORS	OTE: Registered Agont signature 13.	e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1.1 TITLE	Change Addition
NAME	VILLALPANDO, RAMON		1.2 NAME	
STREET ADDRESS	1928 11TH STREET WEST		1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST-ZIP	<u></u>
TITLE		☐ DELETE	2.1 TIFLE	Change Addition
NAME			2.2 NAME	
STREET ADORESS	1		2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	· Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP	Change Addition
NAME		been	4. 2 NAME	- Change - Number
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME	†		5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	_		5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME	1		6.2 NAME	
STREET ADORESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	<u>L</u>		6.4 CITY-ST-ZIP	

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

4/14/98

954-1040