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Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90072 031 ***155.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000059836

1. Corporation Name
L & A LANDSCAPING, INC.



Principal Place of Business
 371 W 36TH ST
 RIVIERA BEACH FL 33404

Mailing Address
 371 W 36TH ST
 RIVIERA BEACH FL 33404

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/02/1998

4. FEI Number
05-0855110

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

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
LIVINGSTON ARMSTRONG, HUGH
371 W 36TH ST
RIVIERA BEACH FL 33404

10. Name and Address of New Registered Agent

81 Name **Routine Leafatt**

82 Street Address (P.O. Box Number is Not Acceptable)
732-51ST STREET

83 **WEST PALM SECRETARY**

84 City **WEST PALM BEACH FL** 85 Zip Code **33407**

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Routine Leafatt* DATE **2/9/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGH LIVINGSTON ARMSTRONG	1.2 NAME	
STREET ADDRESS	371 W 36TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	RIVIERA BEACH, FL 33404	1.4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRITZLEY LEE FATT	2.2 NAME	
STREET ADDRESS	732 51ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33407	2.4 CITY-ST-ZIP	
TITLE	SECRETARY <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAULINE PAMELA LEEFATT	3.2 NAME	
STREET ADDRESS	732-51ST ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33407	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: *Hugh Livingston Armstrong* SIGNATURE: *Routine Leafatt* DATE: **2/9/99** DAYTIME PHONE #: **561-842-6754**

CR2024-111081