

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 469703

**Entity Name:** LUKE'S LANDSCAPING, INC.

**Current Principal Place of Business:**

2950 N. 28TH TERRACE  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

2950 N. 28TH TERRACE  
HOLLYWOOD, FL 33020

**FEI Number: 59-1587233**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title T  
Name PINEDA, LOURDES  
Address 2950 N. 28TH TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

Title D  
Name DIESTEL, DAVID  
Address 2950 N 28TH TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

Title D  
Name FALLON, CHARLES M  
Address 1855 GRIFFIN RD. SUITE A-330  
City-State-Zip: DANIA BEACH FL 33004

Title D, SECRETARY  
Name NATALE, MICHAEL  
Address 1855 GRIFFIN RD, STE A-330  
City-State-Zip: DANIA BEACH FL 33004

Title VP IRRIGATION DIV.  
Name NAPOLEAN, ANTHONY  
Address 2711 SW 36TH STREET  
City-State-Zip: DANIA BEACH FL 33312

Title VP OF ARBOR CARE  
Name VAUGHN, DAVID  
Address 2711 SW 36TH STREET  
City-State-Zip: DANIA BEACH FL 33312

Title PRESIDENT  
Name HUDSON, ANTHONY R.  
Address 2950 N 28TH TERRACE  
City-State-Zip: HOLLYWOOD FL 33020

*I hereby 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 all other like empowered.*

**SIGNATURE: MICHAEL NATALE**

**SECRETARY**

**04/26/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date