## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(6)

1. Corporation Name KENDALL LANDSCAPE COMPANY, INC.

Principal Place of Business

Mailing Address



14750 S W 210 GOULDS FL 33		14750 S W 216 STRE GOULDS FL 33170	ET	Date Incorporated or Qualified     11/03/1972	3a. Date of Last Report 01/17/1995
. Principal Plac	e of Business	2a. Mailing Address	Coortit	4. FEI Number 59-1419310	Applied For
6720	s.w. 104 th street	7 26 6720 S.W.	104TH STREET	39 14 193 10	Not Applicable  \$8.75 Additional
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State	MI FLorida	City & State	FLORIDA	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
M1A	Country	Zip	30 U.S. A.	8. This corporation has liability for i	ntangible tax under s. 199.032,
<b>`</b> ``331'	56 25 U.S. A.	29 3315	30 U.S. A.	Tioned Chinates	□No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
WOLF, STEPHEN M. 6720 S.W. 104TH ST. MIAMI FL 33158			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
			83		
					85 Zip Code
·			84 City	pration submits this statement for the pu and of directors. I hereby accept the app	FL I''
SIGNATURE S	Signature, typied or printed name of registered agen OFFICERS AN	it and this if applicable (f	OTE: Registered Agent signature requie	red when renstating) ADDITHONS/CHANGES TO OFF	
ILE	Р	DELETE	1. 1 TITLE		☐ Change ☐ Addition
IAME	WOLF, STEPHEN M.		1.2 NAME		
TREFT ADDRESS	6720 S.W. 104TH ST.		1 3 STHEET ADDRESS		
-TY-\$1- <b>Z</b> IP	MIAMI FL	DELETE	1.4 CITY - \$1 - ZIP 2 1 TITLE		Change Addition
ITLE	S Wolf, Nancy Lee	T] DETEIG	2 2 NAMÉ		
NAME	6720 S.W. 104TH ST.		2 3 STREET ADDRESS		
STREFT ADDRESS	MIAMI FL		24 CITY-ST-ZIP		
City-st-Zip Tolf		☐ DELETE	3. 1 TILE		☐ Change ☐ Addition
NAME	,		3.2 NAME		
THEEL ADDRESS	,		3.3 STREET ADDRESS		
:TY-\$1-Z!P		☐ DELETE	3.4 CITY-S1-ZIP		Change Addition
ll'L <b>E</b>			4. 1 TILLE 4.2 NAME		
NAME			4 3 STHEET ADDRESS		•
STREET ADDRESS			4 4 City - ST - ZIP		
CHY-ST-ZIP HILE		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - S1 - ZIP		P73 par 526	5.4 CITY-ST-ZIP		Change Additio
TATLE		DELETE	6 1 TITLE		— Спаную — П ходию
NAME			G 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City - ST-ZIP	fy for the exemption stated in Section 11	

I do hereby certify that the information superied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), 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.

STEPHEN M. WOLF