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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

(6)

HILLSBORO NURSERY, INC.

HILLSBUNG NUNSERT, INC.					
Principal Place	of Business	Mailing Address		1 (4 \$111 \$144) (4183 1111 \$514)	ål (sås \$1841 ålås) ålås) ålås ålås) åt <u>å</u> l; føs:
4800 WEST HILLSBORO BLVD. COCONUT OR FL 33073		4800 W HILLSBORG COCONUT CR FL S US			
		03		<ol> <li>Date Incorporated or Qualified</li> <li>08/19/1975</li> </ol>	3a. Date of Last Report 04/25/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1616040	Not Applicable  \$8,75 Additional
Suite, Apt. #	, etc	Suite, Apt. ‡, etc.		5. Gertificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zp	Country	Zip	Country	B. This corporation has liability for in Florida Statutes  Yes	
24	9. Name and Address of Curre	nt Registered Agent	[30]	10. Name and Address of New Re	
	9. Maine and Address of Carre	in Hogiotolaa rigetti	81 Name		
HARTZ	' RAY		82 Street Ad	idress (P.O. Box Number is Not Acceptable	(e)
	W 48 AVE		02 0000715		<u> </u>
	NUT CR FL 33073		83		
			84 City		FL 85 Zip Code
or register	o the provisions of Sections 607.050 and agent, or both, in the State of Flore and appear the obligations of Sec	stion 607 0505. Florida Statute			
or registere familiar wit SIGNATURE	h, and accept the obligations of, Sec Signature, typod or printed ha he of registered agen	ction 607.0505, Florida Statute	NOTE: Registered Agent signature requ		DATE
famil:ar wit	h, and accept the obligations of, Sec Signature, typed or printed name of registered age OFFICERS At	ction 607,0505, Florida Statute ri and tilk Papplicabe.  ND DIRECTORS	NOTE: Registered Agent signature requi	ared when renstating)  ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECTORS IN 12
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SIGNATURE:

JOSEPHINE HARTZ 4-11-97 954-426-1428
GOFFICER OR DIRECTOR Dayline Prome to