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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 489030 (7)

1. Corporation Name

ATLANTIC GARDENS LANDSCAPING, INC.



Principal Place of Business

950 S.E. 15TH ST.  
POMPANO BEACH FL 33060-9530

Mailing Address

950 S.E. 15TH ST.  
POMPANO BEACH FL 33060-9530

3. Date Incorporated or Qualified  
11/05/1975

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOWMAN, BEVERLY  
950 S.E. 15TH ST.  
POMPANO BEACH FL 33060

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent, if not applicable

(NOTE: Registered Agent Signature Required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE DT ☐ DELETE

NAME HASTINGS, HOWARD  
STREET ADDRESS 950 S E 15TH ST  
CITY-ST-ZIP POMPANO BEACH, FL 00000

TITLE PD ☐ DELETE

NAME HOWMAN, SIDNEY  
STREET ADDRESS 950 S E 15TH ST  
CITY-ST-ZIP POMPANO BEACH, FL 00000

TITLE S ☐ DELETE

NAME MOORE, WENDY  
STREET ADDRESS 950 S.E. 15TH ST.  
CITY-ST-ZIP POMPANO BEACH FL

TITLE DV ☐ DELETE

NAME HOWMAN, BEVERLY  
STREET ADDRESS 950 S E 15TH ST  
CITY-ST-ZIP POMPANO BEACH, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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.

SIGNATURE:

*Beverly Howman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BEVERLEY HOWMAN

Date

5-16-96 954-943-1223

Daytime Phone

CR2E034 (12/95)