2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 568398

1. Entity Name

GOLDEN PALM LANDSCAPING AND LAWN MAINTENANCE, INC.

FILED Apr 23, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

9454 S.W. 108 ST. MIAMI, FL 33176 9454 S.W. 108 ST. MIAMI, FL 33176



DO NOT	WRITE	IN THIS	SPACE
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03192008 No Chg-P CR2E034 (11/05)

4. FEI Number	1	Applied For
59-1816541		Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GRUBBS, WILLIAM F. 9454 S.W. 108 STREET MIAMI, FL. 33176

DO NOT WRITE IN THIS SPACE

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8. The above	named entity submits this statement for the pions of registered agent.	ourpose of changing its re-	gistered office or re	egistered agent, or bot	th, in the State of Florida. I am familiar with, and accept	
	to the second					
SIGNATURE.			` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `			
	Signature, typed or printed name of registered agent and title	if applicable (NOTE Re	agistared Agent signatura	required when reinstating)	DATE	
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··· LIFE (4044)) LEE 19 \$ 190'00 _		 Election Campaign Trust Fund Contribe 		\$5.00 May Be Added to Fees	U00000915475 05/09/08-80016-021 150.00	
After May 1, 2008 Fee will be \$550.00		rrager and contrib		70000 10 1 663	U5/U3/U8-8UU16-U21 15U.UU	
10.	OFFICERS AND DIREC	CTORS				
TITLE	PD				•	
NAME	GRUBBS, WILLIAM F				* · · · · · ·	
STREET ADDRESS	_^					
CITY-ST-ZIP	MIAMI, FL				·	
TITLE	ST				•	
NAME	GRUBBS, SANDRA B.					
STREET ADDRESS	9454 SW 108 ST		•	·		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Willia Willia SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

4/19/20

(305) 595 -26/3 Daytime Phone #