05-01-1999 90037 035 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State **DIVISION OF CORPORATIONS** 

D	OCUMENT	#	61	1:	20	4
4	Corporation Name		<b>.</b>	• •		•

LANDSCAPING BY STEVE BLAUM, INC.

Principal	Place of Busines
4540 SW	75TH AVE

Mailing Address

4540 SW 75TH AVE

MIAMI FL 33155

MIAMI FL 33133	MIMMI TE 33133		DO NOT WRITE IN THIS SPACE			
			3. Date incorporated or Qualifed 02/27/1979			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21 45405w 75Ave.	26 P.O. BOX 545	5フ	59-1927855	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State 23 FL 33155	City & State  28 COLAL GABL	es, FL.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 24 25		untry USA	This corporation owes the current year in Personal Property Tax.	ntangible □Yes □No		
9. Name and Address of Curre	10. Name and Address of New Registered Agent					
BLAUM, STEVE		81 Name				
2602 COUNTRY CLUB PR.		82 Street Address (P.O. Box Number is Not Acceptable)				
CORAL GABLES FL 33134		83				
		84 City		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.

- 3		•					
SIGNATURE	Signature, typed or printed name of registered agent a	. (NOTE: B	egistered Agent signature re	acuired when reinstatura)	DATE		
12.	OFFICERS AND		13.		S/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	CP .	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	BLAUM, NANCY	<del>_</del>	1.2 NAME				
STREET ADDRESS	2602 COUNTRY CLUB PR.		1.3 STREET ADDRESS				
CITY-ST-ZIP	CORAL GABLES FL		1.4 CITY-ST-ZIP				
TITLE	SV	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	BLAUM, STEVE	•	2.2 NAME	и			
STREET ADDRESS	2502 COUNTRY CLUB PR.		2.3 STREET ADDRESS	•			
CITY-ST-ZIP	CORAL GABLES FL		2.4 CITY+ST-ZIP	·		اسداد مدیش	
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME		•		
STREET ADDRESS	•	•	3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE	} <u> </u>	☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME	Ć		4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS		,		
CITY-ST-ZIP	·		4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME .		٠,	5.2 NAME	•			
STREET ADDRESS		,	5.3 STREET ADDRESS		•		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	•			
TITLE	,	☐ DELETE	6.1 TITLE		•	☐ Change	☐ Addition
NAME			6.2 NAME	•			
STREET ADORESS			6.3 STREET ADDRESS		•		•
OID/ OT 7ID	ANT CAUSE SID AT HIS TO		6.4 CITY-ST-ZIP		· .	•	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the corporation of the corporation of 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 from an attachment with an address, with all other like empowered.

SIGNATURE: