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FILED

Mar 31 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F40835 (3)

1. Corporation Name
JERRY'S LANDSCAPING, INC.

Principal Place of Business
5909 SW 21 ST.
HOLLYWOOD FL 33083

Mailing Address
P.O. BOX 4127
HOLLYWOOD FL 33083-4127



2. Principal Place of Business

21 9020 NW 21st

22 Suite, Apt. #, etc. Pembroke Pines

23 City & State Florida

24 Zip 33024

25 Country Broward

26 Suite, Apt. #, etc. P.O. Box 4127

27 City & State Hollywood

28 Zip 33083

29 Country Broward

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2a. Mailing Address

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3. Date Incorporated or Qualified
08/18/1981

3a. Date of Last Report
06/24/1996

4. FEI Number
59-2137312

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

KNOWLES, JEROME
5909 SW 21 ST.
HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent

81 Name Jerome Knowles

82 Street Address (P.O. Box Number is Not Acceptable)
9020 NW 21st

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84 City Pembroke Pines FL

85 Zip Code 33024

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 *Jerome Knowles* (NOTE: Registered Agent signature required when reinstating) DATE 3-25-97

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME KNOWLES, JEROME

STREET ADDRESS 9020 NW 21ST. ST.

CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE VP ☐ DELETE

NAME KNOWLES, ALAN

STREET ADDRESS 2061 BAHAMA DRIVE

CITY-ST-ZIP MIRAMAR FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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: *Jerome Knowles* *Jerome Knowles* 3-25-97 954 967-5811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)