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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 03 1998 8:00am Secretary of State

	MENT # F6967 CAL LANDSCAPE AND DE					1
Dischard Dischard Dischard						
Principal Place of Business Mailing Address						
6916 N.W. 29 AVENUE 6916 N.W. 29 AVENUE FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL			na			·
TT. ENOUGH	MEE IE 00000	TT. ENODERIDACE TE GOO	Q U		DO NOT WRITE IN THE	S SPACE
					3. Date Incorporated or Qualified	
					03/04/1982	•
· ·	lace of Business	2a. Mailing Address	•		4. FEI Number	Applied For
21					59-2162437	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22 27		··· • · · · · · · · · · · · · · · · ·				Fee Required
City & State City		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the c	urrent year Intangible
24	25 29 30				Personal Property Tax due June 30.	Yes No
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
	GHES, MARK W		81	Name		
6916 NW 29TH AVENUE FT. LAUDERDALE FL 33309			82 Street Add		ess (P.O. Box Number is Not Acceptable)	
11,	EMODERNATE LE 00008		83			
			84	City	-	85 Zip Code
44 D				 	F	
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 register 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						of changing its registered opointment as registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable (NOTE	Registered Age	ni signalure require	ed when reinstating) DATE	
12.		AND DIRECTORS	13.	nt orginaturo rodant	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	DV DELETE		1.1 TITLE			☐ Change ☐ Addition
NAME	HUGHES, PATRICIA J		1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY - ST - ZIP			
TITLE	DP DELETE		2.1 TITLE			Change Addition
NAME	HUGHES, MARK W		2.2 NAME			
STREET ADDRESS	6916 NW 29TH AVENUE		2.3 STREET ADDRESS			
CITY - ST - ZIP	FT. LAUDERDALE FL		2.4 CITY-ST-ZIP			
TITLE	☐ DELETE		3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS	TADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - S	T-21P		F-1 F-1
TITLE	☐ DELETE		4.1 TITLE			Change Addition
NAME	+ ADDOCC		4. 2 NAME			
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP			4.4 CITY-ST	- ZIP		☐ Change ☐ Addition
TITLE	LJ DELETE		5.1 TITLE			☐ Grande ☐ Wadii[0/1]
NAME PERSON ADDRESS	<u> </u>		5.2 NAME 5.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP TITLE	ZIP DELETE		5.4 CITY-ST 6.1 TITLE	- ZIP		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ANNRESS		
CITY-ST-ZIP			6.4 CITY - ST	- 1		
	ertify that the information supplied	with this filing does not qualify for			Section 119.07(3)(i), Florida Statutes, I further of	certify that the information

14. I hereby certify that the information supplied with this filling 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 or an attachment with an address.

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2/10/08 934