FILE	NOW: FILIN	G FEE AFTI	ER MAY 1	IS \$22	25.00			
, PI	ROFIT PORATION AL REPORT		FLORIDA DEPA Sandra	ARTMENT B Morths	OF STATE			
	996		DIVISION OF	tary of Stat CORPOR				
DOCUMENT # G26785		26785	(7)					
	O LANDSCAPE D	ESIGN, INC.						
Principal Place of Business			iling Address			A LOGICIL COLO DEGLO DISEL SOCIAL	timi bett miner min	is Atani didii difii arbis lans
8892 152ND PLACE SOUTH DELRAY BEACH FL 33446			8892 152ND PLACE SOUTH DELRAY BEACH FL 33446					
						3. Date Incorporated or Qualified 03/08/1983	l l	of Last Report 5/01/1995
2. Principal Plac	ce of Business	2a.	Mailing Address			4. FEI Number		Applied For
Suite, Apt. #	. etc	26	Suite, Apt. #, etc.			59-2302780		Not Applicable \$8.75 Additional
22		27				5. Certificate of Status Desired		Fee Required
City & State		28	City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zıp	Country 25	29	Zip	30	untry	* 8. This comporation has liability for Florida Statutes Y	or intangible ta es - [] No	x under s. 199.032,
24	9. Name and Addres		tered Agent	130]		10. Name and Address of New		Agent
ODEENB	PEDO MILLIAM				81 Name		·	
GREENBERG, WILLIAM 6345 NW 23RD CT.					82 Street Address (P.O. Box Number is Not Acceptable)			
BOCA R	ATON FL 33496				83			
•					84 7 Jy		FL	85 Zip Code
11. Pursuant to or registere	the provisions of Sectioned agent, or both, in the S	ns 607.0502 and 60 State of Florida, Such	7.1508, Florida Statu i change was authori	tes trie ab	s named corpo corporation's ho	oration soling its this statement for the and of directors. Thereby accept the a	purpose of cha appointment as	anging its registered office registered agent. Lanı
familiar with SIGNATURE	n, and accept the obligat WILLIAM GR	4	0505, Florida Statuto		7			L21,1996
12.	Signation by edior priori (1935) o	ngeteratage facilities. FICERS AND DIREC		13.	sge et Schrifta e respir	ad viscolerately) ADDITIONS/CHANGES TO C	DATE FICERS AND	DIRECTORS IN 12
TUFLE	P		DELETE	1 1	TILE]	Change Addition
NAME STREET ADDRESS	GREENBERG, WIL 6345 NW 23RD C				IAME STREE! ADORESS			
CITY-ST-ZIP	BOCA RATON FL			141	CITY - ST - ZIP			
TITLE NAME	s Greenberg, Iris		DELETE .		TITLE NAMÉ		· ·	Change Addition
STREET ADDRESS	6345 NW 23RD C				STREET ADDRESS			
CITY - ST - ZIP TITLE	BOCA RATON FL		DELETE		City-St-Zin			Change Addition
NAME			L)		VAM:		·	
STREET ADDRESS					STREET ADDRESS Dity - St - Zip			
TITLE			DELFIE		TITLE	0000018	332	Addition
NAME CYCEST APPRAISO					NAME STHEEF ADDRESS	-05/21/960 ***600.00	11520	49
STREET ADDRESS CITY-ST-ZIP					DITY - ST - ZIP	***************************************		A4 1444 A 14 A 14 A 14 A 14 A 14 A 14 A
THILE			☐ DELETE		TIFLE			Change
NAME STREET ADDRESS				ŀ	NAME STREET ADDRESS			
CITY-ST-ZIP			- Darate		CITY ST-ZIP			Channe • 4dd tine
TITLE NAME			☐ DELETE		TITLE NAME		-	स्रोजी १५७००
STREET ADDRESS					STREET ADDRESS		`	3/-11
City-SI-ZiP 14. I do hereb	y certify that the informat	on supply (1) his	filing is voluntarily fu	rnished and	CITY-ST-ZIP didoes not qualify	for the exemption stated in Section 1	19.07(3)(k), Fl	orida Statutes 1 furtiner
oath; that I	the information indicated Lam an officer or director Block 12 or Block 13 if (of the cyling then o	rt or supplemental ar ir the receiver or trus tachmient with an ad	see en pow	is true and accu ered to execute t	irate and that my signature shall have this report as required by Chapter 607	rne same lega , Flonda Statu	refrect as ir made under tes land that my name
SIGNAT	UKE: Signified	AND TYPED OR PRINTED	NAME OF SIGNING OFFI	CER OR DIRE	стоя	The second secon	1	Lagitar o Fitomer #