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

DOCUMENT #

G85133

(8)

TREESCAPES, INC.

FILED								
May	11	1998	8:00am					
Sec	ret	ary of	State					



Principal Plac	ce of Business	Mailing Address				
C/O JAMES O. BIRR. JR ESO. C/O JAMES O. BIRR. JR 800 NORTHEAST 3RD AVE. 600 NORTHEAST 3RD AVE. FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304 US			VE		DO NOT WRITE IN	THIS SPACE
			•••		3. Date Incorporated or Qualified 02/17/1984	
2. Principal F	Place of Business	2a. Mailing Address 26	· · · · · · · · · · · · · · · · · · ·		4. FEI Number 59-2390160	Applied For Not Applicable
Suite, Apt.	. #, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	CO 75 Additional
City & Stat	te	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip 24	Country 26	Zip 29	Coun	try	This corporation owes or has paid the Personal Property Tax due June 30.	
[27]	9. Name and Address of Cur		1301	 	10. Name and Address of New Registe	
Bi	RR, JAMES O., JR., ESQ.			Name		5-14-15-16-16-16-16-16-16-16-16-16-16-16-16-16-
600 NORTHEAST 3RD AVE. SUITE 300 FT. LAUDERDALE FL 33304			1	32 Street Add	ress (P.O. Box Number is Not Acceptable)	
			ŀ	33		
			ļī	City	14.44.44.44.44.4	FL 85 Zip Code
office or i	registered agent, or both, in the Sta	ate of Florida. Such change was a	authorized	by the corporal	poration submits this statement for the purpo tion's board of directors. I hereby accept the	ose of changing its registered
agent. 1 a	am familiar with, and accept the ob					
L	Signature, typed or printed riamo of registered			Agent signature requi		ATE F
12.	I PST	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	ULLIAN, ARTHUR R.		1.2 NAM			C CURING C NOUTHING
STREET ADDRESS	105 S VICTORIA PK RD			EET ADDRESS		8
CITY-ST-ZIP	FT. LAUDERDALE FL			-ST - ZIP		į
TITLE		DELETE	2.1 TITL		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			2.2 NAM	IE		
STREET ADDRESS			2.3 STR	EET ADDRESS		
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	3.1 TITL	E		Change Addition
NAME			3.2 NAM	lE	-	
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	4.1 TITL			Change Addition
NAME			4. 2 NA	AE .		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP		I pereze		'-ST-ZIP		T Observed T Addition
TITLE		☐ DELETE	5.1 TITL			☐ Change ☐ Addition
NAME			5.2 NAM			
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	54 CITY 61 TITL	-ST-ZIP		Change Addition
NAME		L ortett		1		CHANGE C AUGILION
STREET ADDRESS			6.2 NAM	EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
J			= v.7 UII I	W1" E//		3

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 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:

(954) 5235864