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PROFIL CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # G95815

(8)

THOMAS DESIANO LANDSCAPING & LAWN MAINTENANCE, I NC.

Principal Place of Business Mailing Address **% THOMAS DESIANO** % THOMAS DESIANO 5500 NW 50TH AVENUE 5500 NW 50TH AVENUE **COCONUT CREEK FL 33073** COCONUT CREEK FL 33073-3720 3. Date Incorporated or Qualified 3a. Date of Last Report 04/11/1984 02/05/1996 2. Principal Frace of Business 2a. Mailing Address 4. FEI Number Applied For 12-2440696 26 Not Applicable Suite, Apit. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, ☑ Yes ☐ No 25 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DESIANO, THOMAS 2216 NOVA VILLAGE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **DAVIE FL 33317** 83 84 City 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signary at typical or printed name of regulated signal and tale if applicable (NOTE Hogistered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE PD Change Addition THUE 1130F **DESIANO, THOMAS** NAME 1.2 NAME 5500 NW 50TH AVENUE STREET ADDRESS. 1.3 STREET ADDRESS COCONUT CREEK FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE THE VTS 2.1 T(T) F Change Addition **DESIANO, THOMAS** NAME 2.2 NAME 5500 NW 50TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS COCONUT CREEK FL CHY-ST-209 2.4 CITY-ST-ZIP DELETE Change Addition THE 3.1 TiTLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 34 CITY-ST-ZIP DELETE Change Addition TILLE 4.1 TITLE NAM: 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY - \$1 - 769 4.4 CITY-ST-ZIP DELETE Change Addition 5 1 TITLE THE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZiP

Daytime finane #

FILED

Mar 04 1997 8:00am

Secretary of State

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