## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #** 

1. Corporation Name

H15495

(5)

**ACTION LANDSCAPING SERVICE INC.** 

Principal Place of Business Mailing Address									II DIBIL BIĞIL 1981	
44) 44 F		14330 SW 155 TER! MIAMI FL 33177								
						3. Date Incorporated or Qualified 08/06/1984	3a. Date	of Last F 5/01/19	Report 195	
2. Principal Place of Business 1		2a. Mailing Address 26			4. FEI Number Applied For Not Applied For			Applied For Not Applicable		
22	Suite, Apt. #, etc. 22 City & State		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
23		City & State				Election Campaign Financing     Trust Fund Contribution			May Be	
Ζφ <b>24</b>	Country 25	Zip 29	30 Cou	ntry		8. This corporation has liability to Florida Statutes	s 🗌 No		199.032,	
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New	Registered .	Agent		
DOCKN	AN LOUIS M. ESO.			81	Name					
ROCKMAN, LOUIS M., ESQ. 8500 S.W. 92ND STREET MIAMI FL 33176				82	Street Ad	ess (P.O. Box Number is Not Acceptable)				
MIAMI F	L 33176			83	_					
				84	City			<b>85</b> Zi	p Code	
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Stat	utes, the abo	ve-n	amed corp	oration submits this statement for the pi	FL irpose of cha	nging its r	registered office	
	ed agent, or both, in the State of Flori th, and accept the obligations of, Sect			orpo	oration's bo	ard of directors. I hereby accept the ap	pointment as	registerec	agent. I am	
SIGNATURE	, ,									
	Signature, typed or printed name of registered agent		NOTE: Registered	Agent	signature requi	red when reinstating)	DATE			
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	ORS IN 12	
TITLE	FEDORKO, GEORGE	DELETE	1.11	TLE				Change:	☐ Addition	
NAME	14330 SW 155 TERRACE		1.2 NA	MŁ						
STHEET AUDRESS	MIAMI FL		1.3 ST	REET	ADDRESS					
CITY-ST-ZIP			1.4 CI	1.4 CITY - ST - ZIP						
TITLE		DELETE	2. 1 1	TLE	1		Ĺ	] Change	☐ Addition	
NAME	FEDORKO, GEORGE		2.2 NA	ΝĘ						
STREET ADDRESS	14330 SW 155 TERRACE		2351	REET.	ADDRESS					
CITY-SI-ZIP	MIAMI FL		2 4 Ci	Y-\$1	I - ZIP					
TiTLE	VD SECONDE MILLIAM	DELETE	3. 1 1)	TLE				Change	Addition	
NAME	FEDORKO, WILLIAM 11740 S.W. 114 CT.		3 2 NA	ME					t	
STREET ADORESS	MIAMI FL		3 3. S1	HEET	ADDRESS				į	
CITY - ST - ZIP	MIMMI FL		3.4 Ci	Y-S1	- ZIP					
TITLE		☐ DELETE	4. 1 Ti	TLE	1			] Change	Addition	
NAME			4.2 NA	ME	ļ					
STREET ADDRESS			4.3 ST	REET,	ADORESS					
CrTY - ST - ZIP			4.4 CIT	Y - \$1	- 2IP					
TITLE		DELETE	, 5. 1 TI	ILE			[	] Change	☐ Addition	
NAME			5 2 NA	ME						
STREET ADDRESS			5351	REETA	ADDRESS					
CITY-S1-ZIP			5.4 CH	Y-SI	- ZIP					
TITLE		DELETE	6 1 Tr	LE	-	···		] Change	Addition	
NAME			6.2 NA	ME	1					
STREET ADDRESS			6.3 ST	REET	ADDRESS				1	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	6.4 CIT	Y-\$1	- ZIP				ľ	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DESCRIPTION Date Date Description Property