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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 23 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

H90390

(6)

JAR	LANDSCAPING & MAINTE	:NANCE, INC.			 	
Principal Plac	e of Business	Mailing Address			-{	ON BEDIN BURN BERNE DEREN BURN BURN 1001
% JUAN A. RODRIGUEZ % JUAN A. RODRIGUE 683 E 22ND ST 683 E 22ND ST HIALEAH FL 33013 HIALEAH FL 33013					<u></u>	E IN THIS SPACE
					3. Date Incorporated or Qualified	
					12/16/1985	
	Principal Place of Business 2a, Mailing Address				4, FEI Number	Applied For
21 26				59-2609789	Not Applicable	
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
					Fee Required	
City & Stat	City & State				6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip	28				Trust Fund Contribution	
24	25		Country 30		This corporation owes or has pa Personal Property Tax due June	
24	9. Name and Address of Curr		301		10. Name and Address of New Re	
D/			81	Name	10.	
	Odriguez, Juan A. 13 e 22nd st					
		82	Street Addre	ess (P.O. Box Number is Not Acceptab	de)	
nı	ALEAH FL 33013		83		•	
			84	City		FL 85 Zip Code
office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Sta rm familiar with, and accept the obli	ite of Florida. Such change was au	uthorized by tl	named corpo he corporation	oration submits this statement for the pon's board of directors. I hereby accep	ourpose of changing its registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title it applicable. (NOTE:	Registered Agent	signature require	d when reinstating)	DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE			Change Addition
NAME			1.2 NAME			l
STREET ADDRESS	683 E 22ND ST		1.3 STREET ADDRESS			!
CITY-ST-ZIP	HIALEAH FL	HIALEAH FL		ZIP		:
TITLE	\$D	DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	RODRIGUEZ, CLARA	RODRIGUEZ, CLARA 222 N		}		
STREET ADDRESS	683 E 22ND ST		2.3 STREET ADDRESS			!
CITY-ST-ZIP	HIALEAH FL		2.4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			1
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			ļ
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME	5.21		5.2 NAME	- 1		
STREET ADDRESS			5.3 STREET AD	DORESS	•	
CITY-ST-ZIP			5.4 City - ST - 2	ZIP		. <u></u>
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			.6.3 STREET AD	DRESS		1
CITY-ST-ZIP			6.4 CITY - ST - 2	ZIP		

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 en powered 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.