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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

Principal Place of Business

FT LAUDERDALE FL 33331

5000 SW 164TH TERR

DOCUMENT # H94930

(5)

Mailing Address

DAVIE FL 33328

STE 213

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4611 S UNIVERSITY DR

J & P LANDSCAPING & LAWN SERVICES, INC.

01/20/1986 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2641178 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Regulred 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 23 Contry 8. This corporation owes or has paid the current year Intangible Zip Country Zip 30 Personal Property Tax due June 30. 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MAURICIO, JOSEPH P. 5000 SW 164TH TERR. 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33331 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the pove-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 authorial by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Sutes. SIGNATURE Signature, typed or printed name of registered agent and title it applicable Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE ☐ Change Addition TITLE MAURICIO, JOSEPH P. RET ANORESS 6801 E TROPICAL WAY STREET ADDRESS **PLANTATION FL** Y-ST-ZIP CITY-ST-ZIP 2. DELETE Change Addition TITLE MAURICIO, ALFONSO 5000 SW 164TH TERR. FET ADORESS STREET ADDRESS FT. LAUDERDALE FL 1-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE NAME ET ADDRESS STREET ADDRESS ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE NAME T ADDRESS STREET ADDRESS ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE NAME EET ADDRESS STREET ADDRESS ST-ZIP CITY - ST - ZIP DELETE Change ☐ Addition TITLE NAME **GIEET ADDRESS** STREET ADDRESS 14. I hereby certify that the information supplied with this filing does not qualify for themption 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 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 report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if Changes or an attachment with an address.

SIGNATURE:

SIGNATURE: €Y-ST-ZIP

FILED
Mar 03 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified