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

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 24 1998 8:00am Secretary of State

DOCUMENT # J14930 (8) 1. Corporation Name H & J LANDSCAPING, INC.					
Principal Plac	e of Business	Mailing Address	······································		iai dadai didii didii 81831 1681
		7878 RED BARROW RD			
BAKER FL 32531 BAKER FL 32531 US US			DO NOT WRITE IN THIS	SODACE	
""		00		3. Date Incorporated or Qualified	S OF AUE
				05/20/1986	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	1 26			59-2718126	Not Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State City & State				Fee Required
23	•	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 _{(p}	Country	This corporation owes or has paid the corporation of the corporat	
24	25	29	30		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
HUTTO, HOMER A. 81 Name					
7878 RED BARROW RD			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
BAKER FL 32531			83		
			63		
			64 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-na				poration submits this statement for the purpose	of changing its registered
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 againt, 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. I am familiar with, and accept the obligation of Section 107.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed narrie of registered agent	and the diagnication (NO)	E Registered Agent signature requir	red when reinstation) DAYE	1- 78
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	10 10 10 10 10 10 10 10 10 10 10 10 10 1	☐ Change ☐ Addition
NAME	HUTTO, HOMER A.		1.2 NAME		
STREET ADDRESS	7878 RED BARROW RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	BAKER FL		1.4 CITY+ST-ZIP		{
TITLE	TURNER, JIM C.	DELETE	2.1 TITLE		Change Addition
NAME CIRCUI ACCORGO	7878 RED BARROW RD		2.2 NAME		
STREET ADDRESS City-St-Zip	BAKER FL		2.3 STREET ADDRESS		
TITLE		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		CT custific CT variation
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELFTE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME PERCET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied with	this filing does not qualify for		Section 119.07(3)(i). Florida Statutes I further of	ertify that the information

14. Thereby 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapped for on an attachment with an address.

SIGNATURE

de la

9-10-00

CRZE034 (10/97