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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 02, 1999 8:00 am  
Secretary of State

03-02-1999 90139 031 \*\*\*150.00

DOCUMENT # J73885

1. Corporation Name

TOP BRANCH NURSERY AND LANDSCAPE, INC.

Principal Place of Business

9437 STATE RD 7  
BOYNTON BEACH FL 33437  
US

Mailing Address

9437 STATE RD 7  
5262 N.W. 92ND LANE  
BOYNTON BEACH FL 33437  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/21/1987

4. FEI Number

59-2807351

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒

Yes ☐ No

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

SOOWAL, ANDREW H.

5262 N.W. 92ND LANE

CORAL SPRINGS FL 33067

9437 ST RD 7  
Boynton Beach,  
FL 33437

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME SOOWAL, ANDREW H.

STREET ADDRESS 5262 NW 92ND LN

CITY-ST-ZIP CORAL SPRINGS FL

TITLE ☒ DELETE

NAME SOOWAL, LOIS J.

STREET ADDRESS 5262 NW 92ND LN

CITY-ST-ZIP CORAL SPRINGS FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME SOOWAL, ANDREW H

1.3 STREET ADDRESS 9437 ST RD 7

1.4 CITY-ST-ZIP Boynton Beach, FL

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME SOOWAL, LOIS J

2.3 STREET ADDRESS 9437 ST RD 7

2.4 CITY-ST-ZIP Boynton Beach, FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 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, with all other like empowered.

SIGNATURE:

Andrew Soowal, Andrew H. Soowal

1-21-99

561-731-2966

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0371641

CR2E034 (11/98)