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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

| DOCUMENT # J77928 (6) J.R.'S LAWN & GARDEN INC. | | | | | | |
|--|--|---|---|---|---------------------------------------|--|
| 11400 ORANGE DR 4580 GLENWOOD DR. | | | | * ************************************* | | |
| DAVIE FL 33X US | 330 | COCONUT CREEK FL 33 | 068-1744 | | | |
| | | | | 3. Date incorporated or Qualified 06/16/1987 | 3a. Date of Last Report 05/01/1996 | |
| 2. Principal | Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For | |
| 21 | · · · · · · · · · · · · · · · · · · · | 26 | | 15-9404399 | Not Applicable | |
| Suite, Ap | if #, €to | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & St | ale | City & State | | 6. Election Campaign Financing | \$5.00 May Be | |
| 23 | Country | | Country | Trust Fund Contribution | Added to Fees | |
| 24 | 25 | 29 | 30 | This corporation has liability for Florida Statutes | Yes No | |
| | g, Name and Address of Cu | | | 10. Name and Address of New R | egistered Agent | |
| CIMOCH, JAMES 4580 GLENWOOD DR. COCONUT CREEK FL | | | 81 Name82 Street | Address (P.O. Box Number is Not Accepta | ble) | |
|] | | | 84 City | | 85 Zip Code | |
| 11. Pursuar | nt to the provisions of Sections 607. | 0502 and 607,1508, Florida Stat | utes, the above-named | corporation submits this statement for the | purpose of changing its registered | |
| office of agent 1 | | | | corporation submits this statement for the poration's board of directors. I hereby acce | | |
| 12. | Signifier by ed or printed name of registere OFFICERS | c agent and title if applicable. (Ni AND DIRECTORS | OTE: Registered Agent & gnature 13. | e required when reinstating) ADDITIONS/CHANGES TO OFFI | CERS AND DIRECTORS IN 12 | |
| 110 LF | D | ☐ DELETE | 1.5 TITLE | | ☐ Change ☐ Addition | |
| NAME | CIMOCH, JAMES R. | | 1.2 NAME | 1 | [5 | |
| STREET ADORESS | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 1.3 STREET ADDRESS | } | | |
| CHY-ST-7# | COCONUT CREEK FL | DELETE | 1.4 City-St-ZIP 2.1 Title | | Change Addition | |
| NAME | | | 2.2 NAME | | • | |
| STREET ADDRESS | s | | 2.3 STREET ADDRESS | | | |
| CHY-SI-ZIP | | DELETE | 2. 4 CITY - ST - ZIP | | ☐ Change ☐ Addition | |
| NAME | | | 3.1 TITLE 3.2 NAME | | □ cuan₫s 1 ×uumon | |
| STREET ADDRESS | s | | 3.3 STREET ADDRESS | } | | |
| CITY-ST-Ziff | | | 3.4. CITY - ST - ZIP | | | |
| HILE | | DELETE | 4.1 TITLE | | Change Addition | |
| NAME | | | 4. 2 NAME | | | |
| STREET ADDRESS | 5 | | 4.4 CITY-ST-ZIP | | | |
| CHY-SI-ZIF TIPLE | | DELETE | 5.1 TITLE | | Change Addition | |
| NAME | | | 5.2 NAME | | | |
| STREET ALKURES | s | | 5.3 STREET ADDRESS |] | | |
| CITY- ST 7IF | | | 5.4 City - ST - ZiP | | | |
| TITLE | | ☐ DELETE | 61 TITLE | ; | Change Addition | |
| NAME | | | 6.2 NAME | · · | | |
| STREET ADDRESS | S | | 6.3 STREET ADDRESS | | | |
| CHY-ST-ZIP | | | 6.4 City - ST - ZiP | L | | |

14. To 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.

SIGNATURE

THATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/08/97 954-977-4424

FILED

May 05 1997 8:00am

Secretary of State