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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

J78505

(1)

R AND R LAWN AND GARDEN EQUIPMENT SERVICE, INC.

| FILED              |
|--------------------|
| Apr 22 1998 8:00am |
| Secretary of State |



|   |   |   |                          |               |  |   | <u> </u>                             |  |
|---|---|---|--------------------------|---------------|--|---|--------------------------------------|--|
| Principal Place of Business Mailing Address   |   |   |                          |               |  | 1 B161. 4141. 4141. 4141. E161. 146.            |                                      |  |
| 30090 SW 170 AVENUE 30090 SW 170 AVENUE   |   |   |                          |               |  |   |                                      |  |
| HOMESTEAD FL 33030 HOMESTEAD FL 33030   |   |   |                          |               |  | DO NOT WRITE IN THIS SPACE                      |                                      |  |
|   |   |   |                          |               |  | 3. Date Incorporated or Qualified               | TIO OFACE                            |  |
|   |   |   |                          |               |  | 06/18/1987                                      |                                      |  |
| 2. Principal P  | lace of Business  | 2a, Mailing Address   |                          |               | <u>-</u>   | 4. FEI Number                                   | Applied For                          |  |
| 21  |   | 26  |                          |               |  | 65-0026272                                      | Not Applicable                       |  |
| Suite, Apt. #, etc. Suite, Apt. #, etc.   |   |   |                          |               |  |   | \$8.75 Additional                    |  |
| 22 27   |   |   |                          |               |  | 5. Certificate of Status Desired                | Fee Required                         |  |
| City & State City & State   |   |   |                          |               |  | 6. Election Campaign Financing                  | \$5.00 May Be                        |  |
| 23  |   | 28  |                          |               |  | Trust Fund Contribution                         | Added to Fees                        |  |
| Z <sub>i</sub> p  | Country   | Zipi  | Cou                      | intry         |  | 8. This corporation owes or has paid the        |                                      |  |
| 24  | [25]  | 29  | 30                       | ,             |  | Personal Property Tax due June 30.              | Yes No                               |  |
|   | 9, Name and Address of Curren   | t Hegistered Agent  |                          | 81            | Name   | 10. Name and Address of New Registe             | red Agent                            |  |
|   | NITH, JAMES ARCHER, JR.   |   |                          |               |  |   |                                      |  |
|   | 30090 SW 170 AVENUE<br>HOMESTEAD FL 33030   |   |                          | 82            | Street Address (P.O. Box Number is Not Acceptable) |   |                                      |  |
| , nc  | MESTERD FL 33030  |   |                          | 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 re  | egistered agent, or both, in the State<br>ni familiar with, and accept the obliga | of Florida. Such change was<br>itions of, Section 607.0505, F | authorize<br>Iorida Stat | d by<br>lutes | the corporat<br>i.                                 | tion's board of directors. I hereby accept the  | appointment as registered            |  |
| SIGNATURE   |   |   |                          |               |  |   |                                      |  |
|   | Signature, typed or prefed hank of registered age                                 |   | <del></del> -            | d Ago         | nt signature requi                                 | red when reinstating) DA                        |                                      |  |
| 12.   | OFFICERS AND  |   | 13.                      |               |  | ADDITIONS/CHANGES TO OFFICERS                   | AND DIRECTORS IN 12  Change Addition |  |
| TITLE   | SMITH, JAMES ARCHER, JR.  | ☐ DELETE  | 1.1 TI                   |               |  |   | Cuange Moonion                       |  |
| NAME  | 30090 SW 170 AVE.   |   | 1.2 N/                   |               | 4000000  |   |                                      |  |
| STREET ADDRESS  | HOMESTEAD FL  |   |                          |               | ADDRESS  |   |                                      |  |
| CITY-ST-ZIP<br>TITLE  | Tromeore to the   | DELETE  | 1.4 CI<br>2.1 TI         |               | 1-ZIP  |   | Change Addition                      |  |
| NAME  |   | La percir   | 2.2 N                    |               |  |   |                                      |  |
| STREET ADDRESS  |   |   |                          |               | ADDRESS  |   |                                      |  |
| CHY-ST-ZIP  |   |   |                          |               | SI-ZIP   |   |                                      |  |
| TITLE   |   | DELETE  | 3.1 TI                   |               | .,   |   | ☐ Change ☐ Addition                  |  |
| NAME  |   |   | 3.2 N                    | AME           |  |   |                                      |  |
| STREET ADDRESS  |   |   | 3.3 \$1                  | rree 1        | ADDRESS  |   |                                      |  |
| CITY-S1-7IP   | 3.  |   |                          | 11Y - S       | 1-2IP  |   |                                      |  |
| TITEF   |   | ☐ DELETE  | 4.1 TI                   | 1LE           |  |   | Change Addition                      |  |
| NAME  |   |   | 4. 2 N                   | AME           |  |   |                                      |  |
| STREET ADDRESS  |   |   | 4.3 S1                   | TREET         | ADDRESS  |   |                                      |  |
| CITY - ST - ZIP   |   |   | 4.4 CI                   | TY-S          | T- ZIP   |   |                                      |  |
| TITLE   |   | ☐ DELETE  | 5.1 TI                   |               |  |   | Change Addition                      |  |
| NAME  |   |   | 5.2 N                    |               |  |   |                                      |  |
| STREET ADDRESS  |   |   |                          |               | address  |   |                                      |  |
| CITY - \$1 - ZIF  |   | T beleve  | 5.4 CI                   |               | T- ZIP   |   | Dhane Dales                          |  |
| TITLE   |   | ☐ DELETE  | 6.1 70                   |               |  |   | Change Addition                      |  |
| NAME  |   |   | 6.2 N                    |               | 1000000  |   |                                      |  |
| STREET ADORESS  |   |   |                          |               | ADDRESS  |   |                                      |  |
| CITY-S1-ZIP   | orlify that the information supplied w  | ith this filing does not qualify                              | 6.4 CI                   |               |  | Section 119.07(3)(i), Florida Statutes, I furth | er certify that the information      |  |

or dealing the information supplied with this limit does not qualify in the Exemption stated in Section 119.07(5)(), Fidinal Statutes. Further definity that the information indicated on this annual report or suppliemental auritual 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.