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 #
1. Corporation Name

J80513

(1)

HORTICULTURAL OPTIONS, INC.

Principal Place of Business

Mailing Address

FILED Feb 17 1998 8:00am Secretary of State



% RICHARD E. BARRETT 115 - 2ND STREET. N.W. RUSKIN FL 33570		% RICHARD E. BARRETT 115 - 2ND STREET, N.W. RUSKIN FL 93570		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/30/1987	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /15-2	2nd. Street N.W.	26 53 Me		65-0014279	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		G. Continuate of Status Desired	Fee Required
City & State 23 RUSKIM, FL		City & State 28 FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 <i>3357</i>	O 25 HILShowugh		Country 30 USA		Yes You No
	9. Name and Address of Current	Registered Agent	-	10. Name and Address of New Registered	d Agent
BARRETT, RICHARD E. BI Name BARRETT, RICHARD E.					~
115 • 2ND STREET, N.W. RUSKIN FL 33570				diress (P.O. Box Number is Not Acceptable)	
			83		
5			84 City Z	uslin Fl	85 Zip Code
	to the provisions of Sections 607 0502	and 607 1508. Florida Statute	s the above-parced or	V - V - V - V - V - V - V - V - V - V -	- 1 1 2 3 3 7 7 7 7
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 [NO]E.	Registered Agent signature rec	quired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	O P	DELETE	1.1 TITLE		Change Addition
NAME	BARRETT, RICHARD E.		1.2 NAME		[;
STREET ADDRESS	115-2ND STREET, N.W.		1.3 STREET ADDRESS		i
CITY-ST-ZIP	RUSKIN FL	I Driege	1.4 CITY-ST-ZIP		
TITLE	DAS CAN PA	☐ DELETE	21 TITLE		L Change Addition
NAME ATOMET ADDOCCO	MOBLEY, JOHN M.		2.2 NAME		
STREET ADDRESS	ROUTE 1, BOX 925 MOULTRIE GA		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MYSCINIE CA	DELETE	2. 4 CITY-S1-ZIP 3.1 TITLE		Change Addition
NAME		—	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		·	4.4 CITY-ST-ZIP		
TIFLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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 or supplimental 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 chapter 607, or on an attachment with an address.