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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J82599

(8)

ARMSTRONG LANDSCAPING, INC.

FILED Mar 04 1997 8:00am Secretary of State

Principal Place 1455 STACY S' W. PALM BEAC	TREET NORTH CHIFT 38417 EDGC HILL ROW	Mailing Address -1455 STACY STREET I W. PALM BEACH FL 3 1 3-01 E0 96	ehill Ro.	3. Date Incorporated or Qualified 3a. Date of Last Report	
IN Mola	i Beach, Fl 339	417 WPalm B	eads FL 3341	77 07/13/1987	03/06/1996
·	lace of Business	2a. Mailing Address		4. FEI Number 59-2760761	Applied For
Suite, Apt. i	#, etc	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	>	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 _{(p}	Country	This corporation has liability for	
24	25	29	30	Florida Statutes	Yes No
A Dà (g, Name and Address of Cu	urrent Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	istrong, ted 5 Stacy Street North -	-1201 Fdal		ddress (P.O. Box Number is Not Acceptat	LIA
W.F	PALM BEACH FL 33417	V Palur Bch,	Oliosi ur	JOTESS (P.O. BOX HUMBER IS NOT ACCOPTAL	DIB)
	V	V Palur Bch,	FL 83		
	•	33,	417 84 City	······································	85 Zip Code
11. Pursuant t	to the provisions of Sections 607	7.0502 and 607.1508, Florida Sta	atutes, the above-named co	orporation submits this statement for the p	ourpose of changing its registered
office or re	egistered agent, or both, in the !	State of Florida, Such change woobligations of, Section 607,0505	as authorized by the corpo	ration's board of directors. I hereby accept	pt the appointment as registered
SIGNATURE		•			
	Signature typical or pointed name of register OCCIOEDS	ri, diagent and tille if applicable. (SIAND DIRECTORS	(NOTE Registered Agent signature re-	· · · · · · · · · · · · · · · · · · ·	DATE
TITLE	D	DELETE	13. 1.3 TITLE	ADDITIONS/CHANGES TO OFFICE Director	Change Addition
NAME	ARMSTRONG, CAROL	- 1 - 44	1.2 NAME	Armstrong, Carol	·
STREET ADDRESS	145 5 STACY ST. NORTH	W Polmosiade, F	1.3 STREET ADDRESS	1201 Edgehill Rd	
CHTY-ST-ZIF	W. PALM BEACH FL	W Polherslate, 1	1.4 CITY-ST-ZIP	WPB, FL 33417	
TITLE NAME	ADMOTRONIO TED			D Armstrong, Ted	Change Addition
STREET ADDRESS	1455 STACY ST. NORTH	1201 Edgetill A WPB, FZ 3341	2.3 STREET ADDRESS	1201 Edgehill Rd	
CITY-SI-ZIP	W. PALM BEACH FL	WPB, FZ 3341	7 2. 4 CITY-ST-ZIP	WPB, FL 33417	
TITLE	and the service of the service below about the service service service and the service	☐ DELETE	3.1 THLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-7IP	The second section of the second second section of the second sec	וות מלונדנ	3.4. CITY-ST-ZIP		Change Addition
TITLE NAME		L) DÉCETE	4.1 TITLE 4. 2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-SI-ZIP			4.4 CITY-ST-ZIP		
TIFLE		DELETE			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
3MAM			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			6.4 CITY-ST-ZIP		
14. Loo nereb informatio	by certify that the information sup in indicated on this annual repor	pplied with this filing does not quet or supplemental same report	uality for the exemption stat is true and accurate and the	ted in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lega	s. I further certify that the al effect as if made under oath; that
Lam an of appears in	ticer or director of the corporation In Block 12 or Block 13 if charge	on or the federiver or fusible orned ed, or on an all all achieves with an	powered to execute this rep aggress.	ted in Section 119.07(3)(i), Florida Statute hat my signature shall have the same legs port as required by Chapter 607, Florida S	Statutes; and that my name