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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J97015

(8)

BOCA LAWN MAINTENANCE, INC.

FILED Jan 14 1997 8:00am Secretary of State

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, i	ce of Business	Mailing Address	·				
* DONALD K. CERA			3426-7844	6-7844			
Sometime state						3. Date Incorporated or Qualified 3a. Date of Last Report 01/24/1996	
2. Principal Place of Business 2a. Mailing Address						4, FEI Number Applied For	
21 26						65-0007674 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired See Required Fee Required	
			· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing			
23	28				Trust Fund Contribution		
Zip	Country	Zip		intry		8. This corporation has liability for intengible tax under s. 199.032,	
24	25 29 30 g. Name and Address of Current Registered Agent		30	Π-		Florida Statules Yes No	
re-	······	Tott (Togistorea rigotis		81	Name	10. Traile his various of hear tragestored vigorit	
CERA, DONALD K. 1310 SW 28TH AVE				00	Charles A dela	ess (P.O. Box Number is Not Acceptable)	
BOYNTON BEACH FL 33426				82	Street Addre	ess (P.O. Box number is not Acceptable)	
				83			
				84	City	85 Zip Code	
## Duraupat	to the provinces of Pastions 607	0500 and 607 1509 Elorida Stat	utor the a	bour	named coro	oration submits this statement for the purpose of changing its registered	
office or	registered agent, or both, in the St am familiar with, and accept the of	tate of Florida. Such change was	authorize	d by	the corporation	on's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registeret	diagent and tage it applicable (No.	OTF Benistere	d Ane	nt signature require	ed when reinstating) DATE	
12.		AND DIRECTORS	13.	u nge	ut signatore recore	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DELETE		1.1 1	1.1 TITLE		Change Addition	
NAMÉ	CERA, DONALD K.		1.2 N	AME			
STREET ADDRESS			1.3 \$	TREET	ADDRESS		
CITY-ST-ZIP				ITY-S	T- ZIP		
TITLE		DELETE 21			}	L. Change L. Addition	
NAME CYOCEL ADORCOC	ADDRESS			2.2 NAME 2.3 STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			2. 4 CHTY-ST-ZIP		l l	a	
TITLE			3.1 TITLE		/· •:-	Change Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 S	TREET	ADDRESS		
CITY-ST-ZIP					ST - ZIP		
TITLE		DELETE		4.1 TITLE 4. 2 NAME		L Change L Addition	
NAME:			- 1				
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NAME				52 NAME		the control of the co	
STREET ADDRESS		•			ADDRESS		
CITY - ST - ZIP				5.3 STREET ADDRESS 3.4 CITY - ST - ZIP			
TITLE				6.1 TITLE		Change Additio	
NAME		****	6.2 N		Ì	 • • 	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			1		T-ZIP		

14. I do 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 of Block 13 if thanged, or on an attachment with an address.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/97 56/35/5323