Feb 18, 1999 8:00 am Secretary of State

02-18-1999 90017 007 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCU 1. Corporatio	MENT # K29851							
MICCI'S LAWN SERVICE, INC.								
Principal Plac	o of Rusinoss	Mailing Address				<u> </u>		ELDII BIBII 1881
		ū	5128 CHAKANOTOSA CIRCLE					
ORLANDO FL	OTOSA CIRCLE 32818	ORLANDO FL 32818				DO NOT WRITE IN TH	IS SPACE	
U\$		US				Date Incorporated or Qualifed	·	
						07/25/1988		
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	Ap	oplied For
21		26				59-2907994		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	<b>T</b> - · ·	Additional equired
City & Stat		City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	a ' <b>-</b> -			8. This corporation owes the current year t		
24	25	29 30				Personal Property Tax.	Yes	□No
9. Name and Address of Current Registered Agent					lame	10. Name and Address of New Registere	a Agent	
MIC	CIANTUONO, JOHN							
512	8 CHAKANOTOSA CIR		82 Street Addr		ess (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32818				83		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	:					7	11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	•			84 0	City	F	L 85 Zip	Code ' 1"
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligations.	of Florida. Such change was auf	thorized	o by the	amed corpo corporation	oration submits this statement for the purpose in's board of directors. I hereby accept the app	of changing its ointment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	4 and title if applicable (NOTE: I	Panistared	1 Agent sic	nature required	when reinstating) DATE		· ·
12.	OFFICERS AND		13,	. rigent on	gridiano rogamos	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE	PD OF TOLERO ALL	☐ DELETE	1.1 1	TLE		•	Change	☐ Addition
NAME	MICCIANTUONO, JOHN	•		1.2 NAME				
STREET ADDRESS	EARL OURISANIOTOGA OID		1.3 ST	TREET AD	DRESS	•		
CITY-ST-ZIP ORLANDO FL		1.4 CITY-ST-ZIP						
TITLE	DS	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME	MICCIANTUONO, KATHY C.		2.2 N	2.2 NAME				
STREET ADDRESS				2.3 STREET ADDRESS		•-		
CITY-ST-ZIP	ORLANDO FL		_	ITY-\$T-Z	IP			□ Addition
TITLE .	mark to the second	☐ DELETE	3.1 11		Ì		Change	∐ Addicoli
NAME			3.2 N	AME				
STREET ADDRESS	A REPORT OF		3.3 STREET ADDRESS					11.04
O111-31-ZIF	<del>                                     </del>		_	MY-ST-Z	IP		<del></del>	Addition
TITLE			4.1 TT 4.2 N			·	- J. S. Landy	
NAME				TREET AD	DRESS			
STREET ADDRESS		•		ITY-ST-Z	1			
CITY-ST-ZIP TITLE		DELETE	5.1 TI		-		Change	Addition
NAME	1	_	5.2 N					
STREET ADDRESS	 		5.3 ST	TREET AD	ORESS			
CEN CT 710	¶ ₹4:		5.4 CI	ITY-ST-ZI	P )			

CITY-ST-ZIP 14. I 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 chapted, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Status Carr

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

-12-99

407-298-6765

☐ Change

☐ Addition