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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| FILED | | | | | | | | | |
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| May 01 1998 8:00am | | | | | | | | | |
| Secretary of State | | | | | | | | | |

| Į P | | MENT CUSE LA | # K893 NDSCAPING, IN | | (4) | | | | | | | |
|---|---------------------------|---------------------------------------|--|------------------------------------|--|-------------------|--------------|----------------------|--|-------------------|---|--|
| ĺ | | | | | | | | | | | | |
| Principal Place of Business Mailing Address | | | | | | | | | T temlatit des chità tàtab titti Ribit jeat diati ein | ii didii didii di | Mai Mimit (#A) | |
| 455 CREEK LANE DRIVE 455 CREEK LANE DRIVE | | | | | | | | | 1 | | | |
| E | NGLEWOOD | FL 34223 | | ENC | SLEWOOD FL 34223 | | | | DO NOT WRITE IN THIS SPACE | | | |
| ĺ | | | | | | | | | 3. Date Incorporated or Qualified | | | |
| • | | | | | | | | | 05/19/1989 | | | |
| | Principal Pl | Place of Business 2a. Mailing Address | | | | | | | 4. FEI Number | 1 | Applied For | |
| 21 | | | | 26 | | | | | 65-0116582 | | Not Applicable | |
| Ь | Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | - | Additional | |
| 22 | City & State | | | | City & State | | | | | | Required | |
| 23 | Ony & State | Sily & State | | | 28 | | | | 6. Election Campaign Financing Trust Fund Contribution | | May Be I to Fees | |
| l | Zip | | Country | | ip | Cou | ntry | | 8. This corporation owes or has paid the cu | | *************************************** | |
| 24 | | | 25 | 29 | | 30 | | | | | □ No | |
| | | 9. Name | and Address of Cui | rent Registe | red Agent | | | | 10. Name and Address of New Registered | Agent | | |
| | | O, JOHN F | | | | | 61 | Name | | | | |
| 180 NO. INDIANA AVENUE ENGLEWOOD FL 34223 | | | | | | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| | | | | | | | 83 | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | 84 | City | FI | 85 Ziç | Code | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a | | | | | | | 2006 | named corp | oration submits this statement for the purpose | of changing | its registered | |
| | office or re agent. La | egistered aç m familiar wi | gent, or both, in the Si ith, and accept the ol | late of Florida oligations of S | . Such change was Section 607.0505. F | authorized | d by utes | the corporati | ion's board of directors. I hereby accept the ap | pointment a | s registered | |
| Sit | SNATURE | | , | | , | | | | | | | |
| <u> </u> | | Signature, typed | or printed name of registered | | | | i Age | nt signature require | ed when reinslating) DATE | | | |
| 12 | | | OFFICERS | AND DIRECT | DRS DELETE | 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | D DIRECTO | | |
| TOTAL | | D | ROBERT J. | | ☐ pereie | 1.1 TiT 1.2 NA | | | | L. Criange | L] Addition | |
| | EET ADDRESS | | EEK LANE DRIVE | | | - 1 | | ADDRESS | | | | |
| | Y-ST-ZIP | | NOOD FL | | | 1.4 Cf | | | | | | |
| TITL | | - HOLL | | | DELETE | 2.1 111 | | 1-2# | | Change | Addition | |
| M | AE I | | | | | 2.2 NA | ME | | | | | |
| STR | EET ADDRESS | | | | | 2.3 ST | REET | ADDRESS | | | | |
| СП | Y-ST-ZIP | | | | | 2.4 CI | ITY-S | T-ZIP | | | | |
| TITL | £ | | | | DELETE | 3.1 TIT | TLE | | | ☐ Change | Addition | |
| HAA | Æ | | | | | 3.2 NA | WE | | | | | |
| STR | EET ADDRESS | | | | | 3.3 ST | REET | ADDRESS | | | | |
| | Y - 51 - 21P | | | | T DELETE | 3.4. CI | | T-ZIP | | Change | Addition | |
| TITL | | | | | ☐ DELETE | 4.1 TH | | | | L Change | Magnion | |
| | | | | | | 4. 2 N | | annacce | | | | |
| ı | EET ADDRESS | | | | | | | ADDRESS | | | | |
| TITL | Y-ST-21P .E | | | | DELETE | 4.4 CT 5.1 TIT | | 1-217 | | Change | Addition | |
| NAA | | | | | | 5.2 NA | | | | | - | |
| ı | EET ADDRESS | | | | | | | ADDRESS | | | | |
| 1 | Y-51-21P | | | | | 5.4 CIT | | | | | | |
| TITL | .E | | | | DELETE | 6.1 111 | TLE | | | Change | Addition | |
| l MAL | ar i | | | | | 62 NA | MF | 1 | | | | |

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 changed, or on an attachment with an address.

SIGNATURE:

STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP