

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

**FILED**

**May 01 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # K95692 (5)**

1. Corporation Name  
**GOLDEN PALM LANDSCAPING AND TREE SERVICE, INC.**



Principal Place of Business <b>9454 S.W. 108 ST. 17555 B. DIXIE HIGHWAY, SUITE 107-A MIAMI FL 33176 US</b>	Mailing Address <b>9454 S.W. 108 ST. MIAMI FL 33176-3624 US</b>
---	--

2. Principal Place of Business 21 <b>9454 S.W. 108 ST.</b> Suite, Apt. #, etc. 22 City & State 23 <b>Miami FL.</b> Zip 24 <b>33176</b>	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 <b>FL</b>
---	--

3. Date Incorporated or Qualified <b>06/15/1989</b>	3a. Date of Last Report <b>04/26/1996</b>
4. FEI Number <b>65-0128292</b>	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**GRUBBS, WILLIAM F.  
9454 SW 108 ST  
MIAMI FL 33176**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
**FL** 85 Zip Code

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 *William F. Grubbs* DATE **4/23/97**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		DELETE
TITLE	<b>D GRUBBS, WILLIAM F.</b>	<input type="checkbox"/>
NAME	<b>GRUBBS, WILLIAM F.</b>	
STREET ADDRESS	<b>9454 SW 108TH STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	<b>D GRUBBS, SANDRA W.</b>	<input type="checkbox"/>
NAME	<b>GRUBBS, SANDRA W.</b>	
STREET ADDRESS	<b>9454 SW 108TH STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *William F. Grubbs* DATE **4/23/97**

CR2E034 (9/96)