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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L00758

(7)

LUIS CINTRON'S LAWN SERVICE, INC.

FILED								
Feb	13	1997	8:00am					
Se	cre	tary o	of State					

Principal Place	e or Business	Maning Address			1	•			
% LUIS CINTRO 11886 52ND RE WEST PALM BI) N	% LUIS CINTRON 11886 52ND RD N WEST PALM BEACH FL	33411-9039		3	Date Incorporated or Qualified	3a. Da	ite of Last Re	eport
						07/07/1989	02/	02/1996	
2. Principal Pl	ace of Business	2a. Mailing Address			4	. FEI Number		Ap	plied For
21		26			İ	65-0128242		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						\$8.75	Additional
22		27			0	Certificate of Status Desired	L-J	Fee Re	quired
City & State)	City & State			6	. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Count	у	8	 This corporation has liability fo 	r intangible		. 199.032,
24	25	29	30					X No	
	9. Name and Address of Curre	nt Registered Agent	8	• • • • • • • • • • • • • • • • • • • •), Name and Address of New R	egistered	Agent	
	ron, Luis		8	Name	ie	· ·			İ
	86 52ND RD N		В	2 Stree	et Address	(P.O. Box Number is Not Accepta	able)		
WES	ST PALM BEACH FL 33411 -9 03	9		_			·	······································	
			8	3					
			8	4 City	·····		*** 1	85 Zip (Code
							<u> </u>		
11. Pursuant to	to the provisions of Sections 607.05	02 and 607.1508, Florida Statue of Florida, Such change was	utes, the abo s authorized	ve-name ov the co	ed corporat orporation's	ion submits this statement for the s board of directors. I hereby acc	o esogruq apt the apr	changing it pointment as	s registered registered
agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	gations of, Section 607.0505, F	Florida Statut	es.	• •			•	
SIGNATURE									
	Signature, typed or printed name of registered ag	B	OTE: Registered A	gent signati	ture required wt	nen reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	C IN 10
12.		ND DIRECTORS DELETE	13.		<u>.</u>	ADDITIONS/CHANGES TO OFF	ICERS AND	Change	Addition
TITLE	D D	☐ DETEIE	1.1 TITLE					L.J. Change	
NAME	CINTRON, LUIS		1.2 NAM			•			
STREET ADDRESS	11886 52ND RD N		1.3 STR	ET ADDRESS	SS				
CITY - ST - ZIP	ROYAL PALM BEACH FL			-ST-ZIP				7 66	3 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
TITLE	D	DELETE	2.1 TITL					Change	Addition
NAME	CINTRON, PAMELA G.		2.2 NAM	E					
STREET ADDRESS	11886 52ND RD N		2.3 STAI	ET ADDRES	SS				
CAY-ST-ZIP	ROYAL PALM BEACH FL		2. 4 CIT	-ST-ZIP					
TITLE		☐ DELETE	3.1 TITL	•	ŀ	•		Change	Addition
NAME			3.2 NAM	E		•			
STREET ADDRESS			3.3 STR	ET ADDRES	is				
CITY-ST-ZIP			3.4. CIT	1-51-ZIP				116:	[] A 1 100
TITLE		☐ DELETE	4.1 TSTL	ŧ	-			L Change	Addition
NAME			4. 2 NA	Æ					
STREET ADDRESS			4.3 STR	et addres	ss				
CITY-ST-ZIP			4.4 City	-ST-ZIP					
TITLE		☐ DELETE	5.1 TiTL	Ε				Change	Addition
NAME			5.2 NAN	IE .					
STREET ADDRESS			5.3 STR	EEY ADDRES	ss				
CITY-ST-ZIP			5.4 CITY	-ST-ZIP					
TITLE		DELETE	6.1 TITU	E				Change	Addition
NAME			6.2 NAA	1E					
STREET ADDRESS			6.3 STR	EET ADORES	ss				
CITY-ST-ZIP		0	1	-ST-ZIP					
0111-31-10	L					Section 110 07/31/i) Florida Stati	too I furth	or cortifu the	tho

14. I do hereby certify that the information supplied with this fling 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 supplying tal annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the recover 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:

Just Cullum One 5 PON T

9-10-97 561-798-651