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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L26721 (5)
MANCUSO BROTHERS LAWN MAINTENANCE, INC.

FILED Apr 14 1997 8:00am Secretary of State

Principal Place 138 E HAMPTO JUPITER FL 33 US	ON WAY	Mailing Address 138 E. HAMPTON WAY JUPITER FL 33458-8144 US			
				3. Date Incorporated or Qualified 10/31/1989	3a. Date of Last Report 07/26/1996
2. Principal Pl	ace of Business	2a. Mailing Address 26		4. Fet Number 65-0139824	Applied For Not Applicable
Suite, Apt.	W, etc.	Suite, Apt. #, etc.			\$8.75 Additional Fee Regulred
City & State)	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip :	Country 25	28] 210 29	Country 30	8. This corporation has liability for int	
24	9. Name and Address of Curre	Line:	[30]	10. Name and Address of New Regi	
4604	ICUSO, ROBERT 10 JUPITER FARMS RD ITER FL-83478		81 Name 82 Street Addr 83 84 City	ress (P.O. Box Number is Not Acceptable	B5 Zip Code
SIGNATURE	Signature, typed or printed name of registered ag		OTE: Registered Agont signature requit		DATE
12.	D OFFICERS AN	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	MANCUSO, ROBERT 138 E HAMPTON WAY JUPITER FL	ليا هنانا	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP		
TITLE NAME STREET ADORESS	MANCUSO, RHONA 138 E HAMPTON WAY JUPITER FL	DELETE	2.1 TITLE 2.2 NAMC 2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	VOITILITIE	DECETE	2 4 CHY-SI-ZIP 31 HTLF 32 NAME 33 STREET ADDRESS		Change Addition
TITLE NAME STREET ADDRESS		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME		DELETE	4.4 CHY - ST - ZIP 5.1 TITLE 5.2 NAME		Change Addition
NAME STREET ADDRESS DITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Ditete	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CHY-ST-ZIP	f in Section 119.07(3)(i), Florida Statutes.	Change Addition

I. 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 advandar report or supplemental 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 of file resolver 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 we fully himself with an address.

appears in Block 12 of Block 13 if changed, or on we full summer with an address.