## 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 # L39452

(2)

FISCHER & FISHER LANDSCAPING & LAWN SERVICE, INC

Principal Place of Business Mailing Address 610 DUTCH CT. S.E 341 THOR AVE. S.E. UNIT #2 PALM BAY FL 32909-8609 PALM BAY FL 32909 ИŜ 3. Date Incorporated or Qualified 3a. Date of Last Report 01/03/1990 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 6852 S. BABCOCK STREET 65-0162113 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & Statu 5. Election Campaign Financing City & State **\$5.00** May Be 23 Palm Bay Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has flability for intangible tax under s. 199.032, Florida Statutes Yes No Zip US 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent FISCHER, RAYMOND 3222 S.E. JUPITER BLVD. PALM BAY FL 32909 Halm 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this elatement for the purpose of changing its registered office or registered agent I am familiar with, and secept the obligations of, Section 607.0505, Florida Statutes. PRESIDENT £ Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE Change Addition 1.1 TITLE 14HFISCHER, RAYMOND NAM 1.2 NAME CR2E034 810 DUTCH COURT, S.E. 3222 S.E. JUPITER BLVD. 1.3 STREET ADDRESS STREET ADDRESS PALM BAY FL 32909 **3**2909 1.4 CITY-ST-ZIP Cilly: Change Addition DELETE 2.1 TITLE 1019 KRISTIN A. FISCHER NAME 2.2 NAME 810 DUTCH COURT, S.E. 23 STREET ADDRESS STREET ADDRESS 2 4 CITY+ST-ZIP OHY-SE DELETE 3.1 TITLE Change Addition THE 3.2 NAME NAM **3 3 STREET ADDRESS** STREET ADDRESS 3.4. CITY-ST-ZIP  $CH\Gamma r \cdot S$ DELETE 4.1 TITLE Change Addition TIZLE 4. 2 NAME NAMI 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP City-S1 701 Change Addition DELETE THE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST 781 5.4 CITY - ST - ZIP DELETE Addition Change HILF 6.1 TITLE NAME 62 NAME 63 STREET ADDRESS STREET AUDRESS

6.4 CITY - ST - ZIP

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

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

SIGNATURE:

appears in Block 12 or Block

CITY: ST-ZIE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

or on an attackment with an address.

**FILED** 

Apr 28 1997 8:00am

Secretary of State