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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

	1996		s/ 	DIVISION OF	CORPOR	OITAS	NS 					
DOCUM 1. Corporation		L4614	3	(8)								
SWAG	GERTY BROS	. LANDSCAPE	E, INC.									
Principal Place o	of Business		Mailing	Address								
1818 VOTAV				8 VOTAW RD.								
APOPKA FL	32703		AP(OPKA FL 32703								
								3. Date Incorporated of 01/30/1990		3a . Da	te of Last R 03/13/1	
 Principal Place 	ce of Business		2a. Mail 26	ing Address				4. FEI Number 59-29883	15			Applied For
Suite, Apt. #,	, etc.			e, Apt. #, etc.								Not Applicable Additional
2			27					5. Certificate of Status	Desired			Required
City & State			City 28	& State				6. Election Campaign Trust Fund Contribu	_			0 May Be d to Fees
Zip ∏	Cou	intry	Zip			untry		8. This corporation has			tax under s	199.032,
4	9. Name and Ad	dress of Current	29 Registered	Agent	30	·		Florida Statutes 10. Name and Addres		□ No Registered	1 Agent	
					•	81	Name			- B 101 0 C		
	ERTY, MICHAEL	L.				82	Street Add	Iress (P.O. Box Number is N	ot Acceptab	ole)		
	EDAR GLEN DR					83						
	A FL 32703					63						
74 01 14												~~~
I1. Pursuant to	o agent, or both, in '	the State of Fiorida	ı. Such char	nge was authorize	s, the abo	OVE-Da	City med corpor ration's boa	ration submits this statemer ard of directors. I hereby acc	nt for the pur	pose of ci	banoina ita	p Code registered office Lagent, Lam
1. Pursuant to or registered familiar with SIGNATURE	the provisions of Sed agent, or both, in , and accept the obligature, typed or printed ne	the State of Fiorida digations of, Section arme of registered agent an	n 607.0505, nd title if applicab	nge was authorize , Florida Statutes.	E: Registered	ove-na corpor	med corpor ration's boa	ard of directors. I hereby acc	ept the app	rpose of clointment a	hanging its i	registered office I agent. I am
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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 affectment with an address.

SIGNATURE: VM

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/96 Destructions