

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

FILED

97 JUN 24 AM 7:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

M 44458

Lopez Lawn Services, Inc.

Principal Place of Business

Mailing Address

10550 NW 77 Ct
#207
Hialeah, FL 33014

10550 NW 77 CE #207
HALEAH FL 33016-2070

3. Date Incorporated or Qualified 1-1-87	3a. Date of Last Report
4. FEI Number 65-0388081	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

21. Principal Place of Business

2a. Mailing Address

22. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

23. City & State

27. City & State

24. Zip

25. Country

28. Zip

29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Adriel Montero
220 W. 63 St.
Hialeah, FL 33012

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

Adriel Montero

Pres.

4/30/97

Signature of (or printed name of) registered agent and date of appointment

(PRINT) Registered Agent signature required when reappointing

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	NAME	ADRIEL MONTERO	☐ DELETE
STREET ADDRESS			Pres.	
CITY, ST, ZIP				
TITLE		NAME		☐ DELETE
STREET ADDRESS				
CITY, ST, ZIP				
TITLE		NAME		☐ DELETE
STREET ADDRESS				
CITY, ST, ZIP				
TITLE		NAME		☐ DELETE
STREET ADDRESS				
CITY, ST, ZIP				
TITLE		NAME		☐ DELETE
STREET ADDRESS				
CITY, ST, ZIP				

11 TITLE	President	☒ Change ☐ Add
12 NAME	Adriel Montero	
13 STREET ADDRESS	220 W 63 St	
14 CITY, ST, ZIP	Hialeah FL 33012	☐ Change ☐ Add
21 TITLE		
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
31 TITLE		☐ Change ☐ Add
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE		☐ Change ☐ Add
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 TITLE		☐ Change ☐ Add
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE		☐ Change ☐ Add
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

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-06/27/97-01122-002
***165.00 ***165.00

Adriel Montero
6-26-97

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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. 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.