2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M64399

TREÁSURE COAST LANDSCAPE SERVICES, INC.



07-13-2005 90021 027 ***150.00

FILED

Jul 13, 2005 8:00 am

Secrétary of State

Principal Place of Business

9762 87TH PL SOUTH BOYNTON BEACH, FL 33437 Mailing Address

9762 87TH PL SOUTH BOYNTON BEACH, FL 33437

14018973



DO NOT WRITE IN THIS SPACE

07012005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0022619 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PLAISTED, DOUGLAS 17826 PINE NEEDLE TERRACE BOCA RATON, FL 33437

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE				required when reinstating)	DATE
FILE NOWI!! FEE IS \$550.00 Due by September 7, 2005 9. Election Campaign Finance Trust Fund Contribution.		ing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTO	RS	····		·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PLAISTED, DOUGLAS E. 17826 PINE NEEDLE TERR BOCA RATON, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, CHARLENE 17826 PINE NEEDLE TERRACE BOCA RATON, FL				
NAME STREET ADDRESS CITY-ST-ZP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby 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 information indicated on this report or supplemental 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					

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MULTURE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

561 733-4620

Daytime Phor

ATTACHMENT 14018973

HERMAN MOSKOWITZ, C.P.A., P.A.

CERTIFIED PUBLIC ACCOUNTANTS

3850 HOLLYWOOD BLVD.
SUITE 204
HOLLYWOOD, FL 33021

Tel 954: 983 • 6500 Fax 954: 983 • 6155

EMAIL: HERMAN@HMOSKOWITZCPA.COM

July 6, 2005

Division of Corporations P O Box 6198 Tallahassee FL 32314

Re: Treasure Coast Landscape Services Inc 2005 For Profit Corporation Annual Report

Document #: M64399 EIN: 65-0022619

Taxpayer is submitting the enclosed 2005 Annual Report with a payment of \$150.00 and asks you to accept the late filing due to circumstances beyond their control.

We reviewed the clients records, per their request, as they were under the impression the Annual Report was previously filed and paid on time. Our findings indicated the client did submit a prior 2005 Annual Report and a payment of \$150.00. It is our assumption that the previously submission was lost in the mail, as the check which accompanied the filing never cleared the bank. Unfortunately, no one in the taxpayer's accounting department made the connection between the outstanding check and the time requirements for filing the Annual Report.

In view of foregoing and the previous on time filing history of the taxpayer, they ask for your indulgence and understanding of the unusual circumstances surrounding the enclosed late submission. If you have any questions, please do not hesitate to contact the undersigned.

Sincerely,

Herman Moskowitz Certified Public Acc

cc: Treasure Coast Landscape Services Inc