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

PROFIT
CORPORATION
ANNUAL REPORT
1997

Principal Place of Business

14045 SLOAN COURT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M95797

(0)

Mailing Address

14045 SLOAN COURT

WEST COAST LAWN & LANDSCAPE, INC.

FILED Apr 30 1997 8:00am Secretary of State

SPRINGHILL FL 34610 US			Springhill fl 34610-7634 Us								
							3. Date Incorporated or Qualified 08/23/1988	te of Last F <b>15/1996</b>	e of Last Report 5/1996		
2. Principal Pl	lace of Busine	985	<b>├</b> ┈──┐	2e. Mailing Address				4. FEI Number	Α	pplied For	
21			26					59-2903595			ot Applicable
Suite, Apt.	#, e1C.		Suite 27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9		City	City & State				6. Election Campaign Financing		\$5.00	May Be
23			28					Trust Fund Contribution			to Fees
Zip		Country	Zip		Соц	untry	,	8. This corporation has liability for	intangible	te under r	s. 199.032,
24	2		29		30					No	
		nd Address of Cur	rent Registered	Agent		L.,		10. Name and Address of New Re	gistered A	gent	
	O, MICHAEL					81	Name				
1404			£		82 Street Address (P.O. Box Number is Not Acceptable)						
SPRI	inghill fl	34610						( ) = · E · E · E · E · E · E · E · E · E ·	,,,,,		
						83					
						B4	City			Jan 1 7:-	0-4-
							City		FL		Code
11. Pursuant t	lo the provisio	ns of Sections 607.0	0502 and 607.150	08, Florida Statu	ites, the a	pove	e-named cor	rporation submits this statement for the patient for the patient's board of directors. I hereby acceptions	ourpose of	changing i	its registered
office or re	egistered age m familiar with	nt, or both, in the St	ete of Florida. Su Jigations of Sect	ich change was Iion 607 0505 - F	authorize	d by tutes	the corpora	ation's board of directors. I hereby accep	of the appo	pintment as	registered
SIGNATURE	7/11.	Leel 1	Lead	micu	AFI	7	ZAN	DRES	4/2	6/9	フ
SIGNATURE	Signatur, typed or	printed name of recovered	agent and tide if applic	able (NC	It Registere	d Age	ent signature requ	uired when reinstating)	DATE	0//	<i></i>
12.		OFFICERS /	AND DIRECTORS	S	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	RS IN 12
TITLE	D			DELETE	11 T	ITLE				☐ Change	Addition
NAME	TENO, MIC				1.2 N	AME					
STREET ADDRESS	14045 SLC				1.3 S	18EE I	ADDRESS				
CITY-ST-ZIP	Springhil	LL FL			1.4 C	łTY-S	1-2IP				
TITLE				DELETE	2.1 1	îLE				Change	Addition
NAME					2.2 N	AME					
STREET ADDRESS					235	IREET	ADDRESS				
CITY-ST-ZIP					2.40	HY-S	51- <i>Z</i> IP				
TITLE				DELETE	3.1 1					Change	Addition
NAME					3.2 N	AME					
STREET ADDRESS					3.3 S	189 <b>F</b> 1	ADDRESS				
CITY-ST-ZIP					340	HTY - 5	ST-ZIP				
TITLE				DELETE	4.1 1					Change	Addition
NAME					4.21	(AME	j				
STREET ADDRESS					435	IRFET	ADDRESS				
CITY-ST-ZIP							T-ZIP				
TITLE	<del></del>		· · · · · · · ·	DELETE	5.1 10					Change	Addition
NAME				*	5.2 N				'		
STREET ADDRESS					1		ADDRESS				
CITY-ST-ZIP					1		1-ZIP				
TITLE				DELETE	6.1 11					Change	Addition
NAME					6.2 N				'		
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP						INCL I					
14. Ldo hereb	ov certify that t	the information sunn	lied with this filin	a does not qua	lify for the	CYO	motion state	ed in Section 119.07(3)(i), Florida Statute	s I further	cortify that	the
Information I am an of	n indicated or flicer or direct	n this annual report o	or supplemental : i or the receiver o	annual report is or trustee empo	true and a wered to e	accu	rrate and tha	at my signature shall have the same lega ort as required by Chapter 607, Florida S	l effect as	if made un	ider oath: that