2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2004 8:00 am Secretary of State

DOCUMENT # P0000042533=

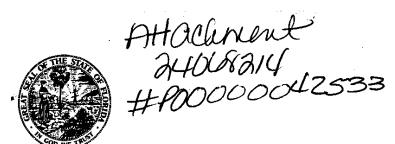
DOCUMENT # P00000042533= 05-04-2004 90194 036 ***150.00 CHERRY TREE LAWN SERVICE, INC. Principal Place of Business Mailing Address 24068214 2125 N.W. 206TH STREET PO BOX 552296 MIAMI, FL 33055 CORAL CITY, FL 33055 CR2E034 (10/03) 04212004 Chg-P 4. FEI Number Applied For 65-1086852 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HEPBURN, MARCUS Street Address (P.O. Box Number is Not Acceptable) 2125 N.W. 206TH STREET MIAMI, FL 33055 City Zip Code 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. DATE (NOTE: Registered Agent signature required when rainstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Addition TITLE ☐ Delete TITLE HEPBURN, MARCUS NAME NAME 2125 NW 206TH ST STREET ADDRESS STREET ADDRESS MIAMI, FL 33055 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE HEPBURN, SHAWNESE NAME NAME STREET ADDRESS PO BOX 55-2296 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAROL CITY, FL 33055 Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE DILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 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 attachapter with an address, with all other like appowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4-127/04 Date 447-1/43 Payline Phone #



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 21, 2004

CHERRY TREE LAWN SERVICE, INC. PO BOX 552296 CORAL CITY, FL 33055

SUBJECT: CHERRY TREE LAWN SERVICE, INC. Ref. Number: P00000042533

Upon receipt of your letter and/or check(s) totaling \$150.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers Document Specialist

Letter Number: 504A00026429