


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 08:00 AM
Secretary of State

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| DOCUMENT # P02000018673 |  |
| 1. Entity Name ISLAND DESIGN LANDSCAPING, INC. | |

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| Principal Place of Business 790 NE 128TH STREET #207 N MIAMI BEACH, FL 33161 | Mailing Address 790 NE 128TH STREET #207 N MIAMI BEACH, FL 33161 |
|--|--|

DO NOT WRITE IN THIS SPACE



03182005 No Chg-P CR2E034 (10/03)

| | |
|--|---|
| 4. FEI Number 65-0025955 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

FANORD, JEAN L
790 NE 128TH STREET
#207
N MIAMI BEACH, FL 33161

**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 _____ Signature, typed or printed name of registered agent and title if applicable **DATE** _____ (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|---|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PSTD FANORD, JEAN L 790 NE 128TH STREET N MIAMI BEACH, FL 33161 |
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04/22/05-80014-021 150.00

**DO NOT WRITE
IN THIS SPACE**

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 attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 15-05 **786-286 2503**
Date Daytime Phone #