

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Aug 09, 2004 8:00 am
Secretary of State

08-09-2004 90007 027 ***150.00

DOCUMENT # P02000021488

1. Entity Name

LOU,S LANDSCAPING&SPINKLERS,INC.



Principal Place of Business

PO.BOX 8227
CORAL SPRINGS FL 33075

Mailing Address

PO.BOX 8227
CORAL SPRINGS FL 33075

24079074



MOORE

CR2E034 (4/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

04-3609604

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ACQUAVELLA, LOUIS A
13215 CITRUS GROVE BLVD
WEST PALM BEACH FL 33412

Name

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

8419 Forest Hills Blvd #102

City

Coral Springs

FL

Zip Code

33075

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME ACQUAVELLA, LOUIS A
STREET ADDRESS 10020 NW 26TH ST APT 4
CITY-ST-ZIP CORAL SPRINGS FL 33075

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8419 Forest Hills Blvd #102
CITY-ST-ZIP Coral Springs FL 33075

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/30/04 954-520-9063
Date Daytime Phone #

Attachment
#P02000021488
24079074
Lou's Landscaping & Sprinklers, Inc.
8419 Forest Hills Boulevard #102
Coral Springs, FL 33075-8227
954-520-9063

August 3, 2004

Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, FL 32314

Dear Sir/Madam:

Enclosed please find the Annual Report for Lou's Landscaping & Sprinklers, Inc. Along with a check for \$150.00. I never received the original mailing that was sent out in January, 2004. I feel that the mix-up was due to the fact that there are two addresses listed as Register and Officer/Director. I would ask that any penalty be abated due to this reason.

Please use the above address for all future correspondence. Thank you.

If I can be of any further service please contact me.

Yours truly,

Louis D. Acquavella

