



2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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

05-04-2004 90188 002 ***150.00

DOCUMENT # P02000042290.																																																																																																																																																											
1. Entity Name SAUTHEAST LAWN SERVICE, CORPORATION																																																																																																																																																											
Principal Place of Business 295 WEST 51ST. STREET HIALEAH, FLORIDA 33012			Mailing Address 295 WEST 51ST. STREET HIALEAH, FLORIDA 33012																																																																																																																																																								
2. Principal Place of Business SAME AS ABOVE			3. Mailing Address																																																																																																																																																								
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																																																																																																																																								
City & State			City & State																																																																																																																																																								
Zip		Country		4. FEI Number RN 04-3661069																																																																																																																																																							
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required																																																																																																																																																							
6. Name and Address of Current Registered Agent JESUS MARTINEZ 295 WEST 51ST. STREET HIALEAH, FLORIDA 33012			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 5px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 5px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 5px;">TITLE</td> <td style="width: 55%; padding: 5px;">PRESIDENT/TREASURER/DIRECTOR <input type="checkbox"/> Delete</td> <td style="width: 10%; padding: 5px;"></td> <td style="width: 15%; padding: 5px;">TITLE</td> <td style="width: 55%; padding: 5px;"></td> <td style="width: 10%; padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Additio</td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;">JESUS MARTINEZ</td> <td></td> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;"></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;">295 WEST 51ST. 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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: 			JESUS MARTINEZ PRESIDENT																																																																																																																																																								
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			APRIL 29/2004 (305) 698-8747 Date Daytime Phone #																																																																																																																																																								