## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

## FILED Apr 13, 2004 8:00 am Secretary of State

DOCUMENT # P02000066768  1. Entity Name PHIL ELLIOTT'S LAWN & LANDSCAPING INC.						04-13-2004 90036 005 ***150.00				
Principal Place of Business 6852 BRUCE COURT LAKE WORTH, FL 33463			6852 BRUCE	Mailing Address 6852 BRUCE COURT LAKE WORTH, FL 33463			<i>3</i>		46	
2. Principal Place of Business			3. Mailing Addr	3. Mailing Address			<b>(1),                                    </b>			
Suite, Apt. #, etc.			Suite, Apt. #,	Suite, Apt. #, etc.			Chg-P	CR2E034 (10/03)		
City & State			City & State	City & State			er 5932	<del>  </del>	pplied For ot Applicable	
Zip	Zip Country		Zip	Zip Count		5. Certificate	of Status Desired	S8.75 Ad Fee Require		
6. Name and Address of Current F			nt Registered Agent	<del></del>			7. Name and Address of New Registered Agent			
KIESLING, ROBERT A						Namphillip Elliott				
4793 N CONGRESS AVE #206 BOYNTON BEACH, FL 33426							(P.O. Box Number is Not Acceptable)			
•			_		City B	Beyfree Cir				
8. The above named entity submits his parement of 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 Myped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
FILE NOW!!!-FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees										
After Ma	ay 1, 2004			T GITG CONTINUED II.						
10.		OFFICERS AN	ID DIRECTORS	11.		ADDITIONS	CHANGES TO OFFIC			
TITLE NAME	P ELLIO	PHILLIP	H)	Delete TITL NAM	1			☐ Change	☐ Addition	
STREET ADDRESS 79 BAYTREE CIR					EET ADDRESS				Ì	
CITY-ST-ZIP BOYNTON BEACH, FL 33436				CITY	/-ST-ZIP					
TITLE			ا 💭 ا	Delete 117L	1			☐ Change	Addition	
NAME Street Address				NAN STR	EET ADORESS				,	
CITY-ST-ZIP					-ST-ZIP				•	
TITLE	<u> </u>			Delete TITL	E'			☐ Change	☐ Addition	
NAME				NAN						
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS '-ST-ZIP					
TITLE				Delete TITL	<del></del>			☐ Change	Addition	
NAME				NAN	L					
STREET ADDRESS					EET ADDRESS				- [	
CITY-ST-ZIP					/-ST-ZiP					
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STREET ADDRESS					EET ADDRESS				}	
CITY-ST-ZIP	<del></del>			СПУ	/-ST-ZIP					
TITLE				Delete Titt				Change	☐ Addition	
NAME Street address				NAN STD	ie Eet address			•		
CITY-ST-ZIP					r-ST-ZIP					
12. I hereby of indicated of the cor	certify that the on this reportation or t	e information supplied w rt or supplemental repor he receiver or trustee en	vith this filing does no t is true and accurate progress to execute	t qualify for the exe and that my signa this report as requ	emption stated in S ture shall have the ired by Chapter 60	Section 119.07(3) e same legal effe 07, Florida Statut	(i), Florida Statutes. It ct as if made under or es; and that my name	further certify that the ath; that I am an office appears in Block 10 c	information or director or Block 11 if	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Se indicated on this report or supplemental report is true and accurate and that my signature shall have the sof the corporation or the receiver or trusted empoyed to execute this report as required by Chapter 607 changed, or on an attachment with an address, with all other like empowered.										
CICNIAT	ubr.		· 🗸 🔪			•	4-8-04			