

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90038 039 ***150.00

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1. Entity Name

BEAUTIFUL IMAGE LAWN & LANDSCAPING INC.



Principal Place of Business

116 NORMANDY CIRCLE WEST
PALM HARBOR FL 34683

Mailing Address

116 NORMANDY CIRCLE WEST
PALM HARBOR FL 34683

94014962



MOORE CR2E034 (11/03)

2. Principal Place of Business

1886 Wood Bend St.

Suite, Apt. #, etc.

3. Mailing Address

1886 WOOD BEND ST.

Suite, Apt. #, etc.

City & State

TARPON SPRINGS, FL.

City & State

TARPON SPRINGS, FL.

4. FEI Number

22-3864320

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip

34689

Country

U.S.A

Zip

34689

Country

U.S.A

6. Name and Address of Current Registered Agent

SPIRIDIS, PETER L
116 NORMANDY CIRCLE WEST
PALM HARBOR FL 34683

7. Name and Address of New Registered Agent

Name

Peter Spiridis

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

1886 WOOD BEND STREET

City

TARPON SPRINGS

FL

Zip Code 34689

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 \$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. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME SPIRIDIS, PETER L
STREET ADDRESS 116 NORMANDY CIRCLE WEST
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE V-PRES ☐ Delete
NAME Tina Kokalidis
STREET ADDRESS 1886
CITY-ST-ZIP T.S.

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME Peter L. Spiridis
STREET ADDRESS 1886 Wood Bend St.
CITY-ST-ZIP T.S. FL 34689

TITLE V-President ☐ Change ☒ Addition
NAME Tina Kokalidis
STREET ADDRESS 1886 WOOD BEND STREET
CITY-ST-ZIP TARPON SPRINGS, FL. 34689

TITLE V-President ☐ Change ☒ Addition
NAME Fotios Kokalidis
STREET ADDRESS 1886 WOOD BEND ST.
CITY-ST-ZIP T.S. FL. 34689

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

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

TITLE ☐ Change ☐ Addition
NAME
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

Peter Spiridis

2/7/04

Date

727-942-4310

Daytime Phone #