

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morhami

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P93000010000 (6)**

1. Corporation Name

THUMBS UP LAWN MAINTENANCE, INC.



Principal Place of Business

Mailing Address

**8518 SW 8TH ST
1338
MIAMI FL 33144
US**

**8518 SW 8TH ST
1338
MIAMI FL 33144
US**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/10/1993

3a. Date of Last Report

06/01/1995

4. FEI Number

65-0386449

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**SAVANY-MARRERO, KARLA
14841 SW 155TH TERR
APT. 14-J
MIAMI FL 33187**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not the same as the corporation's)

Signature of Registered Agent (if not the same as the corporation's)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
	SAVA	NY-MARRERO, KARLA	14841 SW 155TH TERR	
		MIAMI FL		
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
	V	MARRERO, MIGUEL A	14841 SW 155TH TERR	
		MIAMI FL		
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	☐ Change ☐ Addition
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	☐ Change ☐ Addition
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	☐ Change ☐ Addition
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Karla Marrero
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/96 378 8984

CR2E034 (12/95)