FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000010000 (6)

THUMBS UP LAWN MAINTENANCE, INC.

Principal Place of Business	Mailing Address		1	
8518 SW 8TH ST	8518 SW 8TH ST		Ì	
1338	1338			
MIAMI FL 33144 US	MIAMI FL 33144-4053 US		9 Pote Incorporated or Ovelified	3a. Date of Last Report
US	00		3. Date Incorporated or Qualified 02/10/1993	02/19/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0386449	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		6. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	<u></u> Zip	Country	This corporation has liability for	
24 25	29	30		Yes No
	of Current Registered Agent	04 1 1	10. Name and Address of New R	egistered Agent
SAVANY-MARRERO, KARLA		81 Name	BAUANV-MARE	ERD, KARLA
14841 SW 155TH TERR		82 Stree	t Address (P.O. Box Number is Not Accepta	
-APT: 14-J-			<u>4841 S.W. 155</u>	75//.
MIAMI FL 33187		83		
		84 City		I85 Zip Code
		1 1 1	miami	FL (~ は3787
11. Pursuant to the provisions of Section	is 607,0502 and 607,1508, Florida Sta	itutes, the above-name	d corporation submits this statement for the proporation's board of directors. I hereby access	purpose of changing its registered
agent. Lam familiar with, and #ccept	it the State of Florida, Such change wa It the obligations of Section 697.0505	is authorized by the co Florida Statutes	properation's board of directors, thereby acce	apt the appointment as registered
SIGNATURE DOUG	KINUUU) -		JONY-MATTERO	1/15/97
Signature, typed or printed harne of	gradelep agent and title if applicable (I	NOTE: Registered Agent signatu	re required when reinstating)	DATE
	ICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE SAVA	☐ DELETE	1.1 TITLE	president	Change Addition
NAME NY-MARRERO, KARLA		1.2 NAME	Savany-MARRERO	- C
STREET ADDRESS 14841 SW 155TH TER	₹₽	1.3 STREET ADDRESS		E11.
CITY-ST-ZIP MIAMI FL		1.4 CITY - ST - ZIP	miami, FL 381	
TITLE	☐ DELETE	21 TITLE		
NAME MARRERO, MIGUEL A	4			Change Addition
44644 8111 48871 755		22 NAME		Change
STREET ADDRESS 14841 SW 155TH TEP		2.2 NAME 2.3 STREET ADDRESS	5	Change L. Addition
STREET ADDRESS 14841 SW 1551H TEP CITY-ST-ZIP MIAMI FL				Change L Addition
SALASAI PA		2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP MIAMI FL	RR	2 3 STREET ADDRESS 2 4 City-St-Zip		
CITY-ST-ZIP MIAMI FL TITLE	RR	2 3 STREET ADDRESS 2 4 City-St-Zip 3.1 Title		
CITY-ST-ZIP MIAMI FL TITLE NAME	RR	2 3 STREET ADDRESS 2 4 City-St-Zip 3.1 Title 3.2 Name		
CITY-ST-ZIP MIAMI FL TITLE NAME STREEL ADDRESS	RR	2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL	RR DELETE	2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3.4 CITY-ST-ZIP		Change Addition
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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:

FILED

Jan 22 1997 8:00am

Secretary of State