

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

25 MAY - 1 AM 2:32

DOCUMENT # **P93000018489 (3)**

1. Corporation Name

PRAVATA LANDSCAPE SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**3655 LAKEVIEW BLVD.
DELRAY BEACH FL 33445**

**3655 LAKEVIEW BLVD.
DELRAY BEACH FL 33445**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/08/1993** 3a. Date of Last Report **04/26/1994**

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. # etc.

25. State, Apt. # etc.

4. FEI Number

Applied For

65-0390188

Not Applicable

22. City & State

27. City & State

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

23. Zip

28. Zip

6. Election Campaign Financing
Trust Fund Contribution

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

24. City

29. City

8. This corporation has liability for intangible tax under S. 196, U.S.C.,
Florida Statutes. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PRAVATA, MICHAEL
3655 LAKEVIEW BLVD.
DELRAY BEACH FL 33445**

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5

Zip Code

11. Pursuant to the provisions of Sections 607.0965 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as set forth in the 1995 Annual Report of this corporation, as authorized by the corporation's board of directors. I, the undersigned, hereby accept the appointment as registered agent. I am a member of the corporation and the corporation is in good standing under the provisions of Chapter 607, Florida Statutes.

SIGNATURE

Signature of Current Registered Agent (Print Name and Title)

Signature of New Registered Agent (Print Name and Title)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: PRAVATA, MICHAEL STREET ADDRESS: 3655 LAKEVIEW BLVD. CITY, ST, ZIP: DELRAY BEACH FL 33445	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 191.02(3)(b), Florida Statutes. I further certify that the information included on this annual report is true, accurate and complete and that my signature shall have the same legal effect as if made under oath. I am an officer or director of this corporation or the person or persons authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1995

FD-350 (1-95)