FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:28

DOCUMENT # **P93000021908 (7)**

1. **FLORALINDA LANDSCAPE MANAGEMENT, INC.**

109 SANDALWOOD WAY
LONGWOOD FL 32750

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LONGWOOD FL 32750

3. 03/19/1993 | 3a. 04/26/1994

4. FEI Number 59-3178419 | Applied For | Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. This corporation has taken, for purposes of tax under S. 1361(b) Florida Statutes: [✓] Yes [ ] No

9. Name and Address of Current Registered Agent

PAGAN, MELVIN
109 SANDALWOOD WAY
LONGWOOD FL 32750

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. [illegible] 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: [illegible]

12. OFFICERS AND DIRECTORS

P
PAGAN, MELVIN
109 SANDSHOOOD WAY
LONGWOOD FL 32750

ST
PAGAN, AIDA A
109 SANDSWOOD WAY
LONGWOOD FL 32750

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

[ ] Change [ ] Addition

14. I hereby certify that the information supplied with this filing, and this certificate, if applicable, for the corporation named in this document, is true and complete. I further certify that the information contained in the annual report or supplemental annual report is true and complete and that my signature below is a representation that I am a director or officer of the corporation. The payment of the filing fee and the annual report or supplemental annual report is required by Florida Statutes and that my name appears above, or on an attached list, under the proper title as a director or officer with an address.

FILING MUST BE RECEIVED BY MAY 1

SIGNATURE: [illegible]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0040000 CP