

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P93000032205 (5)

1. Corporation Name
THOMAS DEGEORGE LAWN MAINTENANCE, INC.



Principal Place of Business: 510 S. 58TH CT. HOLLYWOOD FL 33023 US
Mailing Address: 510 S. 58TH CT. HOLLYWOOD FL 33023 US

3. Date Incorporated or Qualified: 04/28/1993
3a. Date of Last Report: 03/21/1995

2. Principal Place of Business
21 3910 NW 97TH AVE
22 Suite, Apt. #, etc.
23 City & State: HOLLYWOOD, FL
24 Zip: 33024
25 Country: US
26 Mailing Address: 3910 NW 97TH AVE
27 Suite, Apt. #, etc.
28 City & State: HOLLYWOOD FL
29 Zip: 33024
30 Country: US

4. FEI Number: 65-0424543
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 liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

BROWN, ELIZABETH M.
2128 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

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. 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, typed or printed name of registered agent and date of signature

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	DEGEORGE, THOMAS	
STREET ADDRESS	510 S 58 CT	
CITY - ST - ZIP	HOLLYWOOD FL 33023	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME		
3. STREET ADDRESS	3910 NW 97TH AVE	
4. CITY - ST - ZIP	HOLLYWOOD, FL 33024	
5. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME		
7. STREET ADDRESS		
8. CITY - ST - ZIP		
9. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME		
11. STREET ADDRESS		
12. CITY - ST - ZIP		
13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. CITY - ST - ZIP		

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 unchanged, or on an attachment with an address.

SIGNATURE: *Thomas DeGeorge*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/96 (954)
430-7357
DATE OF FILING

CR2E034 (12/95)