FILE NOW: FILING FEE AFTER MAY 1 IS \$550,00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

2. Principal Place of Easiness

17120 NW 49TH AVE.

CORAL CITY FL 33055

21

DOCUMENT # P93000052683 (8)

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Mailing Address

17120 NW 49TH AVE.

2a. Mailing Address

CORAL CITY FL 33055-4237

J.H. LANDSCAPING INC.

Suite. Apl. #. etc. State Auf at et. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Ζφ $Z_{\rm ID}$ This corporation has liability for intangible tax under s. 199.032, ☐ Yes 🔣 No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name LEIVA, ROLANDO E 7400 SW 50TH TERRACE SUITE 302 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33155-4481 83 84 City Zip Code 11. Pursuant to the provisors of Sections (07.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the 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. Landaular with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE beginner gas no pine name of a general age that the Implemente CROIL Registered Agent signature required when re-astating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. **PSD** DELETE 11 THLE Change Addition 1:116 HERNANDEZ, JULIO 12 NAME TOME 17120 NW 49TH AVE STHELL & HOUSE 1.3 STREET ADDRESS **CORAL CITY FL 33055** (III \$1.75) 1.4 CHTY - ST - ZIP DELETE Change Addition 14.4 2.1 TITLE 2.2 NAME 23 STREET ADDRESS SOUTH Alliance 2. 4 CITY- \$1-ZIP DELFTE Change Addition 3.1 TO F THE NAME 3.2 NAME 3 3 STREET ADDRESS SIMPLATORIS DITY 51 79 3.4. CITY - \$1 - ZIP DELETE Change Addition 1111 41 TITLE Notifi 4.2 NAME STREET, TORKER 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE Change Addition 30.0 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET AND IT E-17-51-70 5.4 CITY - ST - ZIP DELETE Addition Title 6.1 THUE MAME 6.2 NAME SIFH KURING 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP (31Y-51-7II 14. Like hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Hurther certify that the information and safed on this amount report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am am office or or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the kill of a like kill of transpool or on an affactment with an address.

FILED
Mar 27 1997 8:00am
Secretary of State

3a. Date of Last Report

Applied For

Not Applicable

04/23/1996



3. Date Incorporated or Qualified

ULIO HERNANDEZX 3-20-97 × 305-

07/28/1993

65-0443615

4. FEI Number