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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000052683 (8)

J.H. LANDSCAPING INC.

## **FILED** Apr 17 1998 8:00am Secretary of State



2/11/06

Principal Place of Business Mailing Address					i sodinodi dia valde divi dovi obvit baiti divio i laid divid i laid.					D      B    D	
17120 NW 49TH AVE. 17120 NW 49TH AVE.											
CORAL CI	TY FL 33055	COR	CORAL CITY FL 33055								
							DO NOT WRIT	IN THIS	SPACE	<del></del> 1	
							3. Date incorporated or Qualified				
2. Principal f	Place of Business	2a Maiti	ng Address				07/28/1993 4. FEI Number			Applied For	
21	The of Business	26	ng Adaress				65-0443615		<del>   </del>	Applied For Not Applicable	
	#, etc.	····	Suite, Apt. #, etc.				03 04430 13			5 Additional	
22		<u></u> ⊢-₁	27				<ol><li>Certificate of Status Desired</li></ol>			Required	
City & Sta	te	· · · · · · · · · · · · · · · · · · ·	City & State				6. Election Campaign Financing			00 May Be	
23		26	26				Trust Fund Contribution			od to Fees	
Zip	Country	Country Zip Co		Cou	untry B. This corporation owes or has paid			aid the cu	he currept year Intangible		
24	25	29	[	30			Personal Property Tax due Juni		Yes	□ No	
	9. Name and Address of C	urrent Registered	Agent		81		10. Name and Address of New Ro	gistered	Agent		
LEIVA, ROLANDO E						Name					
7400 SW 50TH TERRACE SUITE 302					B2	Street Ar	dress (P.O. Box Number is Not Accepta	olei			
1	MIAMI FL 33155-4481							3.0)			
					83						
				ŀ	84	City			85 Z	ip Code	
						•		FL	_	`	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.150	08, Florida Statute	s, the ab	ove	-named co	orporation submits this statement for the	ourpose o	of changing	g 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 title if applicable (NOTE: Registered A							quired when reinstating)	DATE			
12.	OFFICER I <b>PSD</b>	S AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFI	CERS AN			
TITLE	HERNANDEZ, JULIO		DELETE	1.1 TIT					Chang	e L Addition	
NAME	17120 NW 49TH AVE.			1.2 NA							
STREET ADORESS				1.3 ST	REET /	ADDRESS				ļ.	
CITY-ST-ZIP	CORAL CITY FL 33055	<u> </u>	Contro	1.4 CIT		-ZIP			1 0		
TITLE			DELETÉ	2.1 TIT					Chang	e LAddition	
NAME				2.2 NA							
STREET ADDRESS				1		ADDRESS					
CITY-ST-ZIP TITLE			DELETE	2.400		T-ZIP			Dhar-	h Addition	
			III DECEDE	3.1 TITI					Change	e L Addition	
NAME OTROET ADDRESS				3.2 NAI							
STREET ADDRESS				1		ADDRESS					
CITY-ST-ZIP TITLE			DELETE	3.4 CII		I - ZIP			Chann	Additor	
NAME			DECER	4.1 (1)		j			Change	e L. Addition	
				4. 2 NA		DDDEAD.					
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP TITLE			DELETE	4.4 CIT		- 211			☐ Change	e Addition	
NAME			hand College	5.1 TITE 5.2 NA						L MUNION	
STREET ADDRESS				1		IDDBECO					
						ADDRESS					
CITY-ST-ZIP TITLE			DELETE	5.4 C/T		· ZIP'			Change	e Addition	
NAME			L DELLIE						LI GRANGE	5 LI AUGILION	
i				6.2 NAM		ADDOLCO					
STREET ADDRESS						ADDRESS					
CITY - ST - ZIP				6.4 CIT	Y-\$1	- ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplicmental 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.