

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000065976 (1)**

1. Corporation Name

V-ROSE LANDSCAPE & MAINTENANCE, INC.



Principal Place of Business

**405 SE 16TH CT APT 1
FT LAUDERDALE FL 33316
US**

Mailing Address

**405 SE 16TH CT APT 1
FT LAUDERDALE FL 33316
US**

2. Principal Place of Business

2a. Mailing Address

21 **1510 SW 25 AVE**

26 **1510 SW 25 AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **FT LAUD FL**

28 **FT LAUD. FL**

Zip

Country

Zip

Country

24 **33312**

25 **USA**

29 **33312**

30 **USA**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/17/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0439738

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 liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**VILLAROSE, MATTHEW
405 SE 16TH CT
APT 1
FT LAUDERDALE FL 33316**

E1 Name

E2 Street Address (P.O. Box Number is Not Acceptable)

E3

E4 City

FL E5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 the person designated as registered agent

DATE

Agent's signature required when not stating

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **DPST VILLAROSE, MATTHEW M**
STREET ADDRESS **1711 SW 23RD AVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33312**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

1. TITLE
2. NAME
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1. TITLE
2. NAME
3. STREET ADDRESS
4. 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 if changed, or on an attachment with an address.

SIGNATURE:

Matthew Villarose

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Matthew Villarose

Date:

4.5.96

Dis/this Private *

954 7921162

CR2E034 (12/95)