

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000081338 (4)**

1. Corporation Name

GRECO-ROMAN LAWN CARE, INC.

Principal Place of Business

**1943 DEWEY STREET
HOLLYWOOD FL 33020**

Mailing Address

**1943 DEWEY STREET
HOLLYWOOD FL 33020**



3. Date Incorporated or Qualified

11/19/1993

3a. Date of Last Report

04/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

10. Name and Address of New Registered Agent

**NICNICK, DAVID S ESQ.
BARNETT BANK PLAZA
ONE E. BROWARD BLVD. STE. 700
FORT LAUDERDALE FL 33301**

81 Name

KIMBERLY S. GAYS.

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

2200 N. 46TH AVE

83

84 City

HOLLYWOOD

FL

85 Zip Code

33021

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

Kimberly S. Gays

(NOTE: Registered Agent signature required when reinstating)

2-13-96

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

VD

☐ DELETE

NAME

**ROMANELLO, FRANCIS N
1943 DEWEY STREET
HOLLYWOOD FL 33020**

STREET ADDRESS

CITY - ST - ZIP

TITLE

PD

☐ DELETE

NAME

**KAREGIANES, LAMPROS
1509 N. 18TH COURT
HOLLYWOOD FL 33020**

STREET ADDRESS

CITY - ST - ZIP

TITLE

S

☐ DELETE

NAME

**KAREGIANES, NANNETTE M.
1509 N 18TH COURT
HOLLYWOOD FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

T

☒ DELETE

NAME

**ROMANELLO, LOUIS S.
1400 MONROE ST
HOLLYWOOD FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

TR

☐ DELETE

NAME

**MONAHAN, JOHN F.
2626 HAYES STREET
HOLLYWOOD FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☒ Addition

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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:

Francis N. Romanello *Frank N. Romanello* **V.P.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-13-96

Daytime Phone

CR2E034 (12/95)