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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300083638 (5)

## MIAMI LANDSCAPING CORPORATION

Principal Place of Business Mailing Address					4 (BOLICEN: 1/6 1815# Livit BOLIT EDILI ABUH ABUDI ISION TITIN OHIFO LIVIE IBUZ HOGI					
9291 S.W. B5TI MIAMI FL 3317		9201 S.W. 85TH ST, Miami Fl 33173-4528								
						3.	Date Incorporated or Qualified 12/07/1993		ate of Last F 01/1996	Report
2. Principal P	lace of Business	2a. Mailing Address	3		***************************************	4.	FEI Number	<del>-!</del>		pplied For
21		26				<b>↓</b>	65-0487137			lot Applicabl
Suite Apt		Suile, Apt. #, et	c.			5.	Certificate of Status Desired	X		Additional lequired
City & State	e	City & State				6.	Election Campaign Financing Trust Fund Contribution			May Be to Fees
23   Zip	Country	Zip	Cou	ntrv	<del></del>	<del> </del>	This corporation has liability for i			
24	25	29	30					Yes		s. 199.002,
<u></u>	9. Name and Address of Curr	ent Registered Agent				10.	Name and Address of New Re	pistered"	Agent	
BES	U, ROGER			В1	Name					
B15 NW 57TH AVE					Street Addre	ess (P	O. Box Number is Not Acceptab	le)		
\$UN	TE 484			82						
MIAMI FL 33126				83						
					City				<b>85</b> Zip	Code
	to the provisions of Sections 607 0 egistered agent, or both, in the Sta m familiar with and accept the obl							FL	,	
	Sopration 1 Ten as created name of registered a			i Agei	nt signature require			DATE	DIOCOTO	DO 11 40
12. THU	OFFICERS A	AND DIRECTORS  DELE	13. [E 1,1 ]]	r) E	P/S		ADDITIONS/CHANGES TO OFFIC	ERS ANL	Change	KX Additio
NAME.	ARROYO, GILDA I	Ma bitt	1.2 NA		( -		MARIO A.		ET OURTHR	AAAdullio
STREET ADDRESS	9291 S.W. 85TH ST.						120 AVENUE			
CITY-ST-ZIP	MIAMI FL	/	1.4 GI				FL 33182			
TITLE	STV	DELE:		2.1 TITLE				· ·	Change	Additio
NAME	arroyo, roberto e		2.2 NA	ME						
STREET ADDRESS	9291 S.W. 85TH ST.		2.3 ST	2.3 STREET ADDRESS						
CHY-ST ZP	MIAMI FL		2.4 C	TY-S	IT-ZIP		· · · · · · · · · · · · · · · · · · ·			
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NAME			32 NA							
STREET ADDRESS					ADORESS					
City - \$1 - 7iff		DELE	3.4 CI		-T-ZIP				Change	☐ Additio
THLE		□ DECE							L. Unange	<u> </u>
NAME emitter transported [			4. 2 N		TO DO LEC					
STREET ADDRESS					ADDRESS					
City-Si-ZiP Tille		DELE	4.4 C/ TE 5.1 T/		1-71			<del></del>	Change	Additio
NAME		المناه المنا	5.2 NA							total ricemic
21/11/10	1		3.2 NA	AAIC	1		*			

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CHY-ST-ZF

HILE

NAME

DELETE

14. I do 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 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.

Change

Addition

**FILED** 

Apr 18 1997 8:00am

Secretary of State