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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000083858 (9)

LANDWORKS OF SOUTH OF FLORIDA, INC.

Principal Place of Business Mailing Address P.O. BOX 290423 P.O. BOX 290423 DAVIE FL 33329-0423 DAVIE FL 33329-0423 2. Principal Place of Business 2a. Mailing Address

FILED May 12 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/08/1993 4. FEI Number Applied For 65-0454679 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip ZiD Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SPEER, RICHARD Name 39 N..W 166 STREET Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 1 83 **NEW MEXICO BEACH FL 33169** 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the provi office or registered a agent. I am familiar v Jistered agent and title if appli OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change SPEER, RICHARD 1.2 NAME NAME 5000 SW90 AUE CEXPER City, Pl 5000 6811 S.W. 166TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33331 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 34. CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-7IP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME STREET ADDRESS **53 STREET ADDRESS** CITY - ST - ZIP 5.4 CiTY-ST-ZIP DELETE ☐ Change Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

 Thereby certify that the information supplier indicated on this annual recort or supplierment officer or director of the corporation of the record of the corporation of th th this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 elever or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: