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May 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000006083 (7)

1. Corporation Name  
EARTHWAY LANDSCAPE SERVICES, INC.



Principal Place of Business  
1109 NE 2 ST  
HALLANDALE FL 33009

Mailing Address  
1109 NE 2 ST  
HALLANDALE FL 33009-8515

3. Date Incorporated or Qualified 01/18/1994	3a. Date of Last Report 10/21/1996
4. FEI Number 65-0571827	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent DALE, MICHAEL L 5154 SE FEDERAL HWY STUART FL 34997	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL 85. Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
PD	MAZZELLADIBOSCO, ANDREA	1.1	MAZZELLADIBOSCO, ANDREA
1109 NE 2 ST		1.2	
HALLANDALE FL		1.3	
CITY - ST - ZIP		1.4	
DST	MAZZELLADIBOSCO, PAMELA	2.1	MAZZELLADIBOSCO, PAMELA
1109 NE 2 ST		2.2	
HALLANDALE FL		2.3	
CITY - ST - ZIP		2.4	
		3.1	
		3.2	
		3.3	
		3.4	
		4.1	
		4.2	
		4.3	
		4.4	
		5.1	
		5.2	
		5.3	
		5.4	

14. I do hereby certify that the information supplied with this filing does not qualify for exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included 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: *Andrea Mazzelladibosco* DATE: 4/28/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)