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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90213 010 ***150.00

DOCUI	MENT # P94000	016338			
 Corporation 	n Name				
GREEN	PASTURES LANDSCAPING,	ING.) (## 14 # 14 # 14 # 14 # 14 # 14 # 14 #	8181 21818 81188 11288 (1181 2021 1881
					<u> </u>
Principal Place		Mailing Address	_		
13425 CITRUS GROVE BLVD 13425 CITRUS GROVE BLVD WEST PALM BEACH FL 33412 WEST PALM BEACH FL 334					
US		US		DO NOT WRITE IN TH	HIS SPACE
	•			3. Date Incorporated or Qualifed	<u> </u>
_				02/24/1994	.
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0464591	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27 Cit. 8 Otata			
City & State	e ·	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation owes the current year	
	25		30	Personal Property Tax.	Yes □No
24	9. Name and Address of Curren		30	10. Name and Address of New Register	
			81 Name		
	PP, KENNETH C		82 Street Add	Irono (B.O. Boy Number in Net Acceptable)	
13425 CITRUS GROVE BLVD			OZ Street Add	ress (P.O. Box Number is Not Acceptable)	
WES	ST PALM BEACH FL 33412		83		
•			84 City		85 Zip Code
			- '		FL '
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose	of changing its registered
office or G	enistered agent or both in the State (nf Florida. Such change was au	thorized by the comorati	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	e of changing its registered pointment as registered
office or re agent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligated the control of the control of the control of the provision of the prov	nf Florida. Such change was au	thorized by the comorati	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	e of changing its registered pointment as registered
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14. I 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, with all other like empowered.

SIGNATURE: MINISTER SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/29/89

561-798-9179

Daytime Phone #