## 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 # P94000023498 (6)

FIRST-STOP LANDSCAPING AND LAWN MANAGEMENT, INC.

## **FILED** Mar 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						(	\$ (1899 F111) <b>6</b> [8]8 381	int surc inne
5239 S.W. 40TH AVENUE 5239 S.W. 40TH AVENUE FORT LAUDERDALE FL 33314 FORT LAUDERDALE FL 33				314				
						DO NOT WRITE IN T	HIS SPACE	
						3. Date Incorporated or Qualified 03/23/1994		
2. Principal Place of Business 2a. Ma			Mailing Address			4. FEI Number	Ar	oplied For
21		26	26			65-0496164	No	ot Applicable
Suite, Apt.	#, etc.	<b>—</b>	Suite, Apt. #, etc.			6. Certificate of Status Desired	\$8.75	
22		27					Fee Re	equired
City & State	}	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip	<u> </u>	intry		8. This corporation owes or has paid the	current year Int	angible
24	25	29	30	,		Personal Property Tax due June 30.		No
	9. Name and Address of Curren	t Registered Agent		84		10. Name and Address of New Registe	red Agent	
	IS, JOHN F			81	Name			l
5239 S.W. 40TH AVENUE FORT LAUDERDALE FL 33314				82	Street Addres	Address (P.O. Box Number is Not Acceptable)		
				83				
			i	84	<u></u>		0e 7:- /	Codo
				54	City		FL 85 Zip (	Code
office or re	o the provisions of Sections 607,050; ogistered agent, or both, in the State on familiar with, and accept the obliga	of Florida, Such cha	nge was authorized	d by th	named corpo ne corporatio	ration submits this statement for the purpoin's board of directors. I hereby accept the	se of changing it appointment as	s registered registered
Ū	trial that and assopt the osage	atronis (1, 500), ar	.0000, 1 101100 0101	.0100.				
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable.	(NOTE Registered	d Agent s	signature required	when reinstating) DA	TE	
12.	OFFICERS AND	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 12
TITLE	P		ELETE 1.1 TI	TLE			☐ Change	Addition
NAME	ELLIS, JOHN F		1.2 N/	AME				[:
STREET ADDRESS	5239 S.W. 40TH AVENUE	_	1.3 ST	REET AD	DRESS			į.
CITY-ST-ZIP	FORT LAUDERDALE FL 33314			TY-ST-Z	ZIP			i
TITLE	V	0	ELETE 2.1 TIT	ΙLE			☐ Change	Addition (
NAME	ELLIS, ADA RIVERA		2.2 NA	<b>ME</b>				ı
STREET ADDRESS	5239 S.W. 40TH AVENUE		2.3 ST	REET AD	DAESS			1
CITY-ST-ZIP	FORT LAUDERDALE FL			ITY-\$1-	ZIP			
TITLE		ا ا	ELETE 3.1 Tri				Change	Addition
NAME			3.2 NA					
STREET ADDRESS				REET AD				
CITY-ST-ZIP		——————————————————————————————————————		ITY-\$1-	ZIP		01	6,439
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NAME			4.2 N					
STREET ADDRESS				REET AD	\ \ \			ļ
CITY-ST-ZIP		<u> </u>	4.4 CI ELETE 5.1 TIT	TY-ST-Z	ZIP		Change	Addition
TITLE		ں ت			]		- Onlange	_ Addition
NAME STREET ADDOCCO			5.2 NA		00000			
STREET ADDRESS				REET AD	- 1			
CITY-ST-ZIP TITLE		l l	5.4 CIT ELETE 6.1 TIT	TY-ST-Z	(19		☐ Change	Addition
ī			6.2 NA		1		- ounda	
NAME CTREET ADDRESS					ODECC			
STREET ADDRESS				REET AD				
CITY-ST-ZIP			■ 6.4 C()	TY-ST-Z	ır I			

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.