SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT - CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000041682 (3)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 JUL 23 AH 10: 36

GHEENEH GARDENS LANDSCAPE DESIGNERS & NURSERY, I NC.			
Principal Place of Business Mailing Address		f embreno) ein Enlif Dibie Deiti gelei foet	UDIRA BIUGA 16010 BIINA ADICU 1104 8001
13110 SOUTHWEST 260 STREET 13110 SOUTHWEST 260 STREE	ET		
PRINCETON FL 33032 PRINCETON FL 33032			
		DO NOT WRITE I	
		3. Date Incorporated or Qualified	3a. Date of Last Report
O Delay - Diagonal Durings		06/03/1994 4. FEI Number	05/01/1996
2. Principal Place of Business 2e. Mailing Address			Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.		65-0496505	Not Applicable
22 10505 Deep brook Dr 27	505 Deep brook Dr 27		\$8.75 Additional Fee Required
			\$5.00 May Be
23 Riverview FL 28	2000	Trust Fund Contribution	Added to Fees
24 33569 25 Hillsborougher 30	Country	This corporation owes or has paid Personal Property Tax due June 3	
9. Name and Address of Current Registered Agent		10. Name and Address of New Regi	
DEBBIE SANCHEZ	81 Name 1		
	JA:	ebble Sanchez	
13110 SW 260 STREET PRINCETON, FL	82 Street Aridres	s (P.O. Box No ber is Not Acceptable	" Dr
·	93	<i></i>	
CORAL GABLES FL 33032	" Ki	verview FL	
	84 City		FL 85 Zip Code 69
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the	e above-named corpora	ation submits this statement for the pu	pose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Flori(Ia S	Statules.	is board or directors. Thereby accept	the appointment as registered
SIGNATURE Debbre Sanchez L	alitue SI	anchea 7.	-17- 97
Signature, typied or printed name of registered agent and title if applicable (NOTE Regis	stored Agent signature required s		DATE
	l 3 .	ADDITIONS/CHANGES TO OFFICE	
	.11ME <i>5</i>	anchez, Debor	ah Change Addition
	.2 NAME	1505 Deenbrook	Dr
BOINGETON EL COCCO	.3 STREET ADDRESS	anchez, Debor 1505 Deepbrook Iverview Fl 33	
		Nerview FL 33	7
	.1 TITLE		Change Addition (
l l	2 NAME		
STREET ADDRESS 2			
)	3 STREET ADDRESS		
CITY-ST-ZIP 2.	3 STREET ADDRESS 4 CITY-ST-ZIF		
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CITY-ST-ZIP	3 STREET ADDRESS 4 CITY-ST-ZIP 13 TILE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TILE 2 NAME	QL 7 <i>05</i> 2000,022;	☐ Change ☐ Addition
CITY-ST-ZIP	3 STREET ADDRESS 4 CITY-ST-ZIP 13 TITLE 12 NAME 13 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE 12 NAME 13 STREET ADDRESS	2000022 2000022	☐ Change ☐ Addition 47582——4 7—01030—017
CITY-ST-ZIP	3 STREET ADDRESS 4 CITY-ST-ZIP 13 TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP	2000022 2000022 -07/25/9 ****165.	□ Change □ Addition 475824 701030017 .00 ****165.00
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CITY-ST-ZIP	3 STREET ADDRESS 4 CITY-ST-ZIP 13 TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE	9-765 2000022 -07/25/9 ****165.	☐ Change ☐ Addition 475824 701030017 .00 ****165.00 ☐ Change ☐ Addition

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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

013)1.00-2100