## 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

## DOCUMENT # **P94000045752** 1. Corporation Name

ANGELO'S LAWN CARE OF BOCA, INC.

## Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90089 031 \*\*\*150.00

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9. Name and Address of Current Registered Agent  NASETTI, ANGELO 9804 LAKE SERENA DRIVE BOCA RATON FI. 33496  11. Pursuant to the provisions of Sections 607,0502 and 807,1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. It am familiar with, and accept the obligations of, Section Bott 7,5508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. It am familiar with, and accept the obligations of, Section Bott 7,5508, Floride Statutes.  SIGNATURE  11. Pursuant to the provisions of Sections 607,0502 and 807,1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. It am familiar with, and accept the obligations of, Section Bott 7,5508, Floride Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. TITLE  15. TITLE  16. DELETE  15. TITLE  16. Change  16. Change  16. Change  17. Addition  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. TITLE  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. TITLE  10. Change  11. Change  12. Addition  13. TITLE  10. Change  14. Chinge  14. TITLE  15.												
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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.

3-17-99 Date Date Pt