## 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 # P9400050818 (1)

GREEN POWER LAWN SERVICE & LANDSCAPING, INC.

Principal Place of Business

Mailing Address

## 

FILED

May 13 1998 8:00am

Secretary of State

5390 S.W. 67TH AVE. 5390 S.W. 67TH AVE. MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/08/1994 2. Principal Place of Business 28. Mailing Address 5. W. 128 AUR Applied For 4. FEI Number 65-0510415 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be MiAMI 23 Trust Fund Contribution Added to Fees Zip Country B. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes □ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent REVILLA. CARLOS 3836 S.W. 107 AVE Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI FL 33165 83 City 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 Signature, typed or printed name of registered agent and title d applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition NAME **ZUNIGA, OSCAR** 1.2 NAME 5390 S.W. 67TH AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33155** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE Change 21 TITLE ☐ Addition REVILLA, CARLOS 22 NAME 3836 S.W. 107TH AVE. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CHY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition Addition NAME 4. 2 NAMI STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 500002526185 -05/15/98--01108--038 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS \*\*\*150.00 CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME 500002526185 STREET ADDRESS 6.3 STREET ADDRESS -05/15/98--01108--039 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.