

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000054918 (5)

1. Corporation Name

FLORIDA LAWN SCULPTORS, INC.



Principal Place of Business

3540 NW 50TH AVE
APT K-116
LAUDERDALE LAKES FL 33319
US

Mailing Address

3540 NW 50TH AVE
APT K-116
LAUDERDALE LAKES FL 33319
US

2. Principal Place of Business

21 3331 N 37th AVENUE

Suite, Apt. #, etc.

City & State

23 HOLLYWOOD FL

Zip

24 33021

Country

25 FLORIDA

2a. Mailing Address

26 3331 N 37th AVENUE

Suite, Apt. #, etc.

City & State

28 HOLLYWOOD FL

Zip

29 33021

Country

30 FLORIDA

3. Date Incorporated or Qualified
07/25/1994

3a. Date of Last Report
05/01/1995

4. FEI Number

65-0509333

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

9. Name and Address of Current Registered Agent
MAIMONE, ROBERT JR
3540 NW 50TH AVE
APT K-116
LAUDERDALE LAKES FL 33319

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 fee, if applicable

(Print) Registered Agent Signature (typed or printed name)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MAIMONE, ROBERT JR.
STREET ADDRESS 3540 NW 50TH AVE K-116
CITY - ST - ZIP LAUDERDALE LAKES FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

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CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

13.

1. TITLE D
2. NAME MAIMONE, ROBERT JR.
3. STREET ADDRESS 3331 N 37th AVENUE
4. CITY - ST - ZIP HOLLYWOOD FL 33021 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96 (954) 964-9968

Date

Daytime Phone #

CR2E034 (12/95)