## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P94000073689 (9)

## **FILED** Feb 05 1998 8:00am Secretary of State

CORAL LAWIN & LANDSCAPE, IN	0.			
Principal Place of Business	Mailing Address			<b> </b>
508 NW 14 STREET	508 NW 14 STREET			
DELRAY BEACH FL 33444	DELRAY BEACH FL 334	144	DO NOT INDITE IN THE	\
			DO NOT WRITE IN THIS  3. Date Incorporated or Qualified	SPACE
			10/03/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0525693	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		S. Floring Company Floring	Fee Required
23	28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the co	
24 25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registered	Agent
LACY, JERRY		81 Name		
508 NW 14 STREET		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
DELRAY BEACH FL 33444		83		<del></del>
		84 City	Fl	85 Zip Code
11. Pursuant to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the above-named corpo	pration submits this statement for the purpose of	of changing its registered
<ol> <li>Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Stat agent. I am familiar with, and accept the obligation.</li> </ol>	e or Florida. Such change was gations of, Section 607.0505, F	authorized by the corporation and Statutes.	on's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE				
Signature, typed or printed name of registered at 12. OFFICERS At	pent and title if applicable. (NO ND DIRECTORS	TE: Registered Agent signature require		
TITLE D	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change ☐ Addition
NAME LACY, JERRY		1.2 NAME		
STREET ADDRESS 508 NW 14 STREET		1.3 STREET ADDRESS		İ
CITY-ST-ZIP DELRAY BEACH FL 33444		1.4 CITY-ST-ZIP		
TITLE	DELETE .	2,1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE :	2. 4 CITY-ST-ZIP		
TITLE	L DELETE :	3.1 TITLE		L Change L Addition
NAME STREET AODRESS		3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP		1		
TITLE	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	<del></del>	4, 2 NAME		El simile El residen
STREET ADDRESS		4.3 STREET ADDRESS		1
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		İ
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	☐ DELETE .	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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 of 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 only a attachment with an address.

SIGNATURE: