FILED 2004 FOR PROFIT CORPORATION ANNUAL REPORT Jan 20, 2004 08:00 AM **Secretary of State** DOCUMENT # P94000086514 1. Entity Name ANTONIO'S LAWN SERVICE INC. Principal Place of Business Mailing Address P.O. BOX 23700 2030 NE 52 CT FT. LAUDERDALE, FL US FT LAUDERDALE, FL 33307 US CR2E034 (10/03) 01162004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0538767 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NOLASCO, ANTONIO DO NOT WRITE 2030 NE 52 CT FT. LAUDERDALE, FL IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature regulated when reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NOLASCO, ANTONIO M NAME STREET ADDRESS 2030 NE 52 CT FT LAUDERDALE, FL CITY-ST-ZIP TITLE NAME U00000 107540 STREET ADDRESS U1/20/04-60028-003 150.00 CITY-ST-ZIP TITLE MAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE MAKE STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS C:TY-ST-ZIP TSTS F STREET ADDRESS

12. 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 report or supplemental 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 10 or Block 11 if

CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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