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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000087373 (4)

SAGO LANDSCAPE MAINTENANCE, INC.

Principal Place of Business

Mailing Address

FILED Feb 06 1997 8:00am Secretary of State



7863 WINDJAMMER WAY HOBE SOUND FL 33455			7863 WINDJAMMER WAY HOBE SOUND FL 33455-3967							
					3. Date Incorporated or Qualified 12/01/1994 3a. Date of Last Report 01/23/1996					
· · ·	ace of Business	2a. Mailing Address	}-¬ "			4. FEI Number			Applied For	
Suite, Apt	# ptc	Suite, Apt. #, etc.			65-0540848		607	Not Applicable 5 Additional		
22	π, σιο	27			5. Certificate of Status Desired			e Required		
City & State		City & State	28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country Zip Country 25 29 30					 This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No 				
	9, Name and Address of Curre	ent Registered Agent	8	41	N.C.	10. Name and Address of New Re	gistered /	(gent		
	J, CHARLES		\°	'	Name					
7863 WINDJAMMER WAY HOBE SOUND FL 33455					Street Add	ess (P.O. Box Number is Not Acceptable)				
			8	3						
			8	4	City		FL	85	Zip Code	
11. Pursuant	to the provisions of Sections 607.0	02 and 607 1508. Florida Statu	ites the abo	ve-	named co	rporation submits this statement for the p		changir	na its realstered	
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was	authorized l	by 1	the corpor	rporation submits this statement for the pation's board of directors. I hereby accept	the app	ointmen	t as registered	
SIGNATURE	in termina. With, and accept the ob-	gations of occitor corrector, r	ionaa otatot	.00.						
SIGNATURE.	Signature, typical or printed name of registered r	gent and leth if applicable (NO	TE: Registered A	gent	t signature req	ulred when reinstating)	DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	PST CHARLES	☐ DELETE	1,1 TITLE		ļ			L Char	nge 🗌 Addition	
NAME	HUE, CHARLES		1.2 NAM							
STREET ADDRESS	7863 WINDJAMMER WAY HOBE SOUND FL 33455		1.3 STRE		ì					
CITY-ST-ZIP TITLE	HODE GOOND LE 30400	DELETE	1.4 CiTY 2.1 TiTLE		- ZIP	·····		Char	nge Addition	
NAME		_ breen.	2.2 NAM						1.00/10/1	
STREET ADDRESS					NDDRESS		*.1			
CITY - S1 - ZIP			2. 4 CITY							
TITLE		DELETE	3.1 TITLE					Char	nge Addition	
NAME			3.2 NAM	lE	}					
STREET ADDRESS			3.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP			3.4. CtTY	<u> </u>	r-ZIP		_			
TITLE		DELETE	4 1 TITLE	E				Char	nge 🔲 Addition	
NAME			4 2 NAM	AE						
STREET ADDRESS			4.3 STRE	EET A	address					
CITY-ST-ZIP			4.4 CiTY		- ZIP					
TITLE		☐ DELETE	5.1 TITLE					L Char	nge L Addition	
NAME			5.2 NAM							
STREET ADDRESS			4		ADDRESS					
CHY-ST-ZIP		DELETE	5.4 CITY		- ZIP			Chai	nge Addition	
TITLE		☐ nerest	6.1 TITU					LJ UIBI	iige [_] Wooldon	
NAME STUTE LABORES			6.2 NAM		LODOFOS					
STREET ADDRESS					AODRESS					
C(TY - S1 - ZIP	l la contraction de la contraction del contraction de la contraction de la contraction de la contracti	lind with this filing does not aug	6.4 CITY			ad in Section 110 07/3/(i) Florida Statuta	a f fortha		that the	

non-energy capiting the tried information supplied with this tring does not quality 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.

SIGNATURE: