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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

D.A.	~ <del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>		OF CORPORATIONS		
DOCU 1. Corporation	JMENT # P950	00001835	(4)		
	G LAWN ART, INC.				
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Principal Plac	ce of Business	Mailing Address			PIN 88/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1 (1)/1
5017 BAG	GGETT PLACE	5017 BAGGETT P	LACE		
GOCOA F		COCOA FL 32926			
				3. Date incorporated or Qualified 01/09/1995	3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4. FELNumber	Applied For
Suite, Apt.	# etc	26		39-328621	7 Not Applicable
2	. π, οιο.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	te	City & State			Fee Required
3		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip 4	Country	Zip	Country	This corporation has liability for it.	Added to Fees
4]	25 9. Name and Address of Curren	[29]	30	Florida Statutes X Yes	□No
	B. Hame and Address of Curren	it Hegistered Agent		10. Name and Address of New R	egistered Agent
CIANO	CIOTTO, BRENDA F		81 Name		
5017	BAGGETT PLACE		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)
	DA FL 32926		83		
			63		
			84 City		85 Zip Code
	to the ere in the ere				
11. Pursuant t	to the provisions of Sections 607,0505	and 607.1508, Florida Statu	ites, the above named corro	ration submits this statement for the	FL   S   Zip Code
<ol> <li>Pursuant t or register familiar wit</li> </ol>	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti	and 607.1508, Florida Statu la. Such change was author on 607.0505. Florida Statute	utes, the above-named corporation's boa	oration submits this statement for the purp ard of directors. I hereby accept the appo	pose of changing its registered office pintment as registered agent. I am
			utes, the above-named corpo ized by the corporation's boa es.	pration submits this statement for the purp and of directors. I hereby accept the appo	pose of changing its registered office introduced as registered agent. I am
, , , , , , , , , , , , , , , , , , ,	Signature, typed or printed name of registered agent a	and title if any licanie gr	Ites, the above-named corpolized by the corporation's boals.  OTE Registered Agent's gnature require		pose of changing its registered office pintment as registered agent. I am
12.	Signature, typed or printed name of registered agent in OFFICERS AND	and tille Fap licable (n DIRECTORS)		ed when reinstalling)	pose of changing its registered office introent as registered agent. I am
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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 Stalutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachpent with an address.

IGNATURE:

| GIANCIOTTO | Block | Signature and typed on printed Make of Signing Officer on Director

CR2E034 (12/95)