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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500002085

1. Corporation Name

Feb 15, 1999 8:00 am Secretary of State

02-15-1999 90012 027 ***150.00

CITY BE	AUTIFUL LANDSCAPING,	INC.									
Principal Place	e of Rusiness	Mailing Address			-		11 0 12101 6 1111 5 0111	60 111 10 111			. 18101 BHH 1801
		P O BOX 568481			1			*			
200 W. PINELOCH ST. ORLANDO FL 32806		ORLANDO FL 32856-8481									
CHEANGO TE SESSO		US				DO NOT WRITE IN THIS SPACE					
						3. Date Incorpo		d .			
					1	01/10/199					
2. Principal P	lace of Business	2a. Mailing Address]	4. FEI Number				A	pplied For
21		26				<u>59-32902</u>	9 2		·	N-	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of	Status Desired		\$		Additional
22		27								Fee R	equired
City & State	e	City & State				6. Election Can	npaign Financin	g \square			May Be
23		28				Trust Fund C	Contribution			Added	to Fees
Zip	Country	Zip	Country			8. This corpora	tion owes the cu	irrent yea			·
24	25		30			Personal Pro					₽₩o
	9. Name and Address of Curr	rent Registered Agent				10. Name and	Address of Nev	Registe	ered Age	nt	
woo	DOALL DUCCELL L		81	Nam	9						
Woodall, Russell L 3348 Wald RD.			82	Stree	t Addres	s (P.O. Box Num	ber is Not Acce	ptable)			
	ANDO FL 32806		83			· .	1,	,	- 1		
			84	City			**		8	5 Zip	Code
									<u> FL 🖺</u>	ł	
11. Pursuant office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Stars familiar with, and accept the obline	0502 and 607.1508, Florida Statutes ate of Florida. Such change was aut	s, the above thorized by da Statutes	e-name the cor	d corpora poration's	ation submits this is board of directo	statement for thors. I hereby acc	ept the a	se of char appointme	nging its nt as re	s registered egistered
11. Pursuant office or nagent. I al	to the provisions of Sections 607.0 egistered agent, or both, in the Starm familiar with, and accept the obling signature, typed or printed name of registered.	0502 and 607.1508, Florida Statutes ate of Florida. Such change was auligations of, Section 607.0505, Floridagent and little if applicable (NOTE: F	_			nen reinstating) ' ,		DAT	TE		
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14. 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 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, with all other like empowered.

SIGNATURE:

NING OFFICER OR DIRECTOR