Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90139 028 ***150.00

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500009302

1. Corporation SECON	D NATURE LANDSCAPE IN	C.					
Principal Plac	ce of Business	Mailing Address			4 legilder ise idibi gust ediri balis barit dalil	BEIIB (8188 1411)	00f10 1101 1001
3606 29TH ST E 2101 MANATEE AVE W BRADENTON FL 34208 BRADENTON FL 34205 US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/03/1995		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	T An	plied For
21 26		- -¬ "	7 ~ ~		65-0554087	<u> </u>	t Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			_	\$8.75	Additional
22		27			5. Certifcate of Status Desired	Fee Re	quired
City & Star	te	City & State			6. Election Campaign Financing		May.Be:=
23	28				Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Counti	У	8. This corporation owes the current year In	tangible Yes	□No
24	9. Name and Address of Curre	29 30	<u> </u>		Personal Property Tax. 10. Name and Address of New Registered		
	9. Name and Address of Cure	it Kegisteren Agent	8	1 Name	to. Name and Address of New Registered	~Ageiii	
THOMAS, PAUL E JR.							
3606 29TH ST E				2 Street Ad	dress (P.O. Box Number is Not Acceptable)		İ
BRADENTON FL 34208				3			—— -
				4 City	FL	85 Zip (Code
agent. I a	im familiar with, and accept the obligation. Signature, typed or printed name of registered age.	ations of, Section 607.0505, Florida	a Statute	·S.	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appoint of the purpose of t		
12.		DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
NAME	THOMAS DALILE ID	בן סבננינ	1.2 NAME				
STREET ADDRESS	THOMAS, PAUL E JR 3606 29TH ST E			ET ADORESS			}
	BRADENTON FL 34208			ST-ZIP			
CITY-ST-ZIP TITLE	VP	DENTON FL 34208 14.00 DELETE 2.171				Change	Addition
NAME	¥1		2.2 NAME				_
STREET ADDRESS	3606 29TH ST E			ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-7IP			
TITLE			3.1 TITLE			Change	Addition
NAME			3.2 NAME				ĺ
STREET ADDRESS		,	3.3 STRE	ET ADDRESS			
CiTY-ST-ZIP			3.4. CITY-	ST-ZIP		n aire inter	
TITLE			4.1 TTLE			Change	Addition
NAME			4. 2 NAME	:			
STREET ADDRESS			4.3 STREI	ET ADDRESS			}
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME		•		
STREET ADDRESS				T ADDRESS			}
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			

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 changes or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

POSICHOMADE REPAULIFHEMIS SA GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

2/9/99

(941)747-7029 Daytime Phone #

☐ Change

Addition

(2E034 (11/98)