FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P95000044855 (1) DOCUMENT #

GREENVIEW LAWN CARE AND LANDSCAPE SERVICES, INC.

Principal Place of Business Mailing Address 2527 N W 116 TERR 2527 N W 116 TERR **CORAL SPRINGS FL 33065** CORAL SPRINGS FL 33065 3. Date Incorporated or Qualified 3a. Date of Last Report 06/02/1995 2. Principal Place of Business 2a. Mailing Address 4. FET Number XX Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199,032. 24 25 29 30 Florida Statutes Yes 🗓 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PITTER, CARL S 82 Street Address (P.O. Box Number is Not Acceptable) 7380 W ATLANTIC BLVD MARGATE FL 33063 В3 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed hence of registered agent and tills if applicable (NOTE: Registered Agont a gnature required when reinstating) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME DELETE 1. 1 TITLE Change Addition MCDOUGALL, MICHAEL M NAME 1.2 NAME 2527 N W 116 TERR STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL 33065** CITY-ST-ZIP 1.4 CITY-ST-ZIP ["] DELETE TITLE 2.1 1/11€ Change Addition SHILLEH, ANIS A NAME 2.2 NAME 2591 NW 113 TERR STREET ADDRESS 2.3 STREET ADDRESS SUNRISE FL 33323 CITY - ST - ZIP 2 4 CITY-ST-ZIP THLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-7F 3.4 CHY-ST-ZIP THILE DELETE 4 1 THILE Change Add:tion NAME **900001836159** -05/23/96--01013--003 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS ***200.00 CITY-ST-ZIP 4.4 C/TY - ST - 7/P [] DELETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - \$1 - ZIP TITLE TT DELETE 6. 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 SYREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address.

SIGNATURE: MICHAEL F1, F1
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR MICHAEL M. MCDOUGALL

APRIL 23rd, 1996

Daylinic Prione #

(12/95)

CR2E034