

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000052755 (2)**

1. Corporation Name

REYES LANDSCAPE MAINTENANCE SERVICE INC.



Principal Place of Business

Mailing Address

**7749 N. KENDALL DR.
APT. D320
MIAMI FL 33156**

**7749 N. KENDALL DR.
APT. D320
MIAMI FL 33156**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**REYES, CANDIDO J
7749 N. KENDALL DR.
APT. D320
MIAMI FL 33156**

81 Name

REYES, CANDIDO J

82 Street Address (P.O. Box Number is Not Acceptable)

12720 SW 84 AVE. RD

83

84 City

MIAMI FL 33156

FL

85 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 a family with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

CANDIDO REYES

5/1/96

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PYST**
STREET ADDRESS **REYES, CANDIDO J**
CITY- ST- ZIP **7749 N. KENDALL DR., #D320**
MIAMI FL 33156

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **REYES, CANDIDO J**
CITY- ST- ZIP **7749 N. KENDALL DR., #D320**
MIAMI FL 33156

TITLE ☐ DELETE
NAME
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CITY- ST- ZIP

TITLE ☐ DELETE
NAME
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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 12 or Block 13 or changed or on attachment with an address.

SIGNATURE

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PROSIDENT

CANDIDO REYES

5/1/96 (305) 380-7826

DATE

DISPATCH #

CR2E034 (12/95)