

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

FILED
Oct 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000063710 (4)**

1. Corporation Name

TROPICAL WAVE LANDSCAPING, INC.

Amended 61.25

Principal Place of Business

7515 SW 122 ST.
MIAMI FL 33156
US

Mailing Address

7515 SW 122 ST
MIAMI FL 33156
US



DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/17/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0602444	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**GONZALEZ, RAMON
7878 PONCE DE LEON RD.
MIAMI FL 33143**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 familiar with, and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Ramon H. Gonzalez

President 10/12/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PSD	☐ DELETE		1.1 TITLE	President/Treasure	☐ Change	☐ Addition
NAME	GONZALEZ, RAMON H.			1.2 NAME	Gonzalez, Ramon H.		
STREET ADDRESS	7878 PONCE DE LEON RD.			1.3 STREET ADDRESS	7515 SW 122 ST		
CITY-ST-ZIP	MIAMI FL 33143			1.4 CITY-ST-ZIP	MIAMI FL 33156		
TITLE	V. President	☐ DELETE		2.1 TITLE	V. President	☐ Change	☒ Addition
NAME	Olga Leila Gonzalez			2.2 NAME	Olga Leila Gonzalez		
STREET ADDRESS	7515 SW 122 ST.			2.3 STREET ADDRESS	7515 SW 122 ST.		
CITY-ST-ZIP	MIAMI FL 33156			2.4 CITY-ST-ZIP	MIAMI FL 33156		
TITLE	SECRETARY	☐ DELETE		3.1 TITLE	SECRETARY	☐ Change	☒ Addition
NAME	Ricardo S. Gonzalez			3.2 NAME	Ricardo S. Gonzalez		
STREET ADDRESS	13020 S.W. 82 AVE.			3.3 STREET ADDRESS	13020 S.W. 82 AVE.		
CITY-ST-ZIP	MIAMI FL 33156			3.4 CITY-ST-ZIP	MIAMI FL 33156		
TITLE		☐ DELETE		4.1 TITLE		☐ Change	☐ Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE		☐ Change	☐ Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE		☐ Change	☐ Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information submitted 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.

SIGNATURE

Ramon H. Gonzalez

10/12/98 325-971-1102

CR2E034 (10/97)