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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000069545 (8)

CASTRO'S LANDSCAPING, INC.

FILED May 02 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	, , mar	·				
2342 S.E. OSCI STUART FL 34		2342 S.E. OSCEOLA STR STUART FL 34996-1309	EET					
					3. Date Incorporated or Qualified 09/11/1995		16 of La 2/199	ist Report
Principal Place of Business 2a. Mailing Address					4. FEI Number			Applied For
21		26			59-3332481			Not Applicable
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired		-	75 Additional e Required
City & Stati	e	City & State			Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees
Zφ	Country	Zıp	Cour	ntry	8. This corporation has liability for			ler s. 199.032,
24	25	[29]	30			Yes L		
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New F	legistered .	Agent	
	TRO, ROGER P		į	oi Name				
	2 S.E. OSCEOLA STREET ART FL 34996				dress (P.O. Box Number is Not Acceptable)			
0,0			ľ	83				
			Ţ	84 City	*	FL	85	Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statu	ites, the ab	ove-named	corporation submits this statement for the poration's board of directors. I hereby acc		changi	na its registered
SIGNATURE	Signation, typed or pembed name of registered age		TE: Registered	Agent signatur	e required when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIREC	TORS IN 12
TOTALE	D	☐ DELETE	1.1 191	L E			Cha	
NAMÉ.	CASTRO, ROGER P		1.2 NA	V E				
STREET ADDRESS	2342 S.E. OSCEOLA STREET		1.3 \$TI	REET ADDRESS	}			
City - St - 7IP	STUART FL 34996		1.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	2.1 T/T	LE	·		Cha	nge 🔲 Addition
NAME			2.2 NA					
STREET ADDRESS			•	REET ADDRESS				
CITY-ST-ZIP		Libriete		TY-ST-ZIP			Licha	ann Addition
THE		L_J DELETE	3.1 TIT				Cha	nge L. Addition
NAME CARGO ANDROS SE			3.2 NA	vie Reet address				
STREET ADDRESS CITY - ST - ZIP			1	ice i auumess [Y-ST-ZIP				
Il)tí		DELETE	4.1 T/T				Cha	nge Addition
NAME			4. 2 NA					-
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP				
TiTL(DELETE	5.1 T(1	·			Cha	nge 🔲 Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 \$10	REET ADDRESS				
CITY ST 7/P			5.4 CIT	Y-ST-ZIP				
TITLE	,	DELETE	6.1 TIT	LE			Cha	nge 🔲 Addition
NAMÉ			6.2 NA	ME				
STREET ADDRESS			6.3 \$11	reet address				
City-SI-7P	l	d with this files, door not our		Y-\$T-ZIP	stated in Section 110 07(3)(i) Elected Plats			

I do 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 a 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 conversion 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 chapted, or on an attachment with an address.

SIGNATURE:

Daytime Phone #

0472124