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

Mailing Address

3130 S.E. 17TH AVE.

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

3130 S.E. 17TH AVE.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1997 8:00am

Secretary of State

Addition

Addition

Change

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000070951 (5)

J & S DESIGN LANDSCAPE & LAWN CARE, INC.

CAPE CORAL FL 33904		CAPE CORAL FL 33904-4089					
					3. Date Incorporated or Qualified 09/11/1995	3a. Date of Last R 08/23/1996	teport
2. Principal F	Place of Business	2a. Mailing Address	era a ula socionami		4. FEI Number	Ar	oplied For
21		[26]			APPLIED FOR 65-0	6/1698 NO	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		Additional equired
City & Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution	00.6\$	May Be to Fees
Zip	Country	2:0	Country				
24	25	29 30	ָת : `		8. This corporation has liability for intangible tax under s. 199.032, Fiorida Statutes		. 100.002,
	9. Name and Address of Curren		·		10. Name and Address of New Reg		
HAC	K, L. RANDALL		81	Namo		Francisco de la contracto de l	
	8 S.E. 17TH AVE., #1		-	Charles & state	ess (P.O. Box Number is Not Acceptab		
CAPE CORAL FL 33990			82 Street Add		ess (P.O. Box Number is Not Acceptab	10)	
0, 0			83		The second second control and a second control and the second control and a second control an		
			:				2
			84	City		FL 85 Zip	Code
office or agent. I s					oration submits this statement for the p ion's board of directors. I hereby accep		registered
12.	Signature, typod or printed name of registered age OFFICERS AN		egistered Ag	rupor arutangia tiri	ed when reinstalling) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTOR	29 INI 12
TITLE	DP OFFICERS AN	DELETE	1.1 TOTLE		ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	GLANDING, SHERI		1.2 NAME			( onango	
STREET ADORESS	3130 S.E. 17TH AVE.		i	ADDRESS			
CITY-ST-ZIP	CAPE CORAL FL 33904		14 CHY-5				
TITLE	DST	DELETE	2 1 TITLE	21-11		☐ Change	Addition
NAME	NORTHROP, NATHAN	_	22 NAME				
STREET ADDRESS	1023 S.E. 15TH ST	<u></u>		ADDRESS			
CITY-ST-ZIP	CAPE CORAL FL 33990		2 4 CHTY-			•	
TITLE	3	☐ DELETE	3 1 TITLE			Change	Addition
NAME			3.2 NAME			_	
STREET ADDRESS			3.3 STREE	I ADDRESS			
CITY-ST-ZIP			3.4. CHY-				
TITLE		DELETE	4. THLE			Change	Addition
NAME	1		4. 2 NAME			•	
ATOCCT ADDRESS				455556			

14. 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 ampfal report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the conjunction or the esciver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13/if graygod, or or an additionally great with an address.

4.4 CHY-ST-ZIP

5.4 STREET ADDRESS 5.4 CITY-ST-ZIP

6.4 STREET ADDRESS

5 TITLE

5.2 NAME

6. TITLE

6.2 NAME

DELETE

\_\_ DELETE

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