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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF \$1416 Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P95000078819 (6)

1. Corporation Name

1. ISCINITS LAWING & LANDSCAPING SERVICES INC.

LUSCIOUS LAWNS & LANDSCAPING SERVICES, INC. Principal Place of Business Mailing Apdress 1471 NORTHEST 174TH STREET 1471 NORTHEST 174TH STREET NORTH MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL 33162 3. Date In 3a. Date of Last Report 10/13/1995 2. Principal Place of Business 4. FEJ Number 2a. Mailing Address 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 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent 24 25 29 30 9. Name and Address of Current Registered Agent 81 Name LINDA BUTLER THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD Number is Not Acceptable) Street Address 82 343 ALMERIA AVENUE **CORAL GABLES FL 33134** 83 City Zip Code 33/62 NO MIAMI BEACH 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 agent; or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lan familiar with, and accept the obligations of Section 607.0505, Florida Statutes. Duties) SIGNATURE entand the dayon 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSTD TT DELETE TIFLE 1 1 7 TUTLE Change ☐ Addition BUTLER, DAVID A NAME 1.2 NAME 1471 NORTHEST 174TH STREET STREET ADDRESS 13 STREET ADDRESS NORTH MIAMI BEACH FL 33162 CITY - ST - ZIP 1.4 CITY - \$1 - 2IF DELETE TITLE 2.1 THUE ☐ Change Addition BUTLER LINDA NAME 2.2 NAME 1471 NE 174th ST STREET ADDRESS 2.3 STREET ADDRESS NO MIAMI BEACH 7 6 33162 CITY-ST-ZIP 2.4 Cify - \$1 - 2iF DELFTE TITLE 3 1 TIFLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 City ST-209 DELETE TITLE 4 1 TITLE Change Addition NAMé 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY ST-21P THILE DELETE 5 TUDE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP TITLE DELETE 6 LTULE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - 2IP

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 if changed, or on an attachment with an address.

SIGNATURE:

ACOLUA STULLO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/96

956-7885 Chaytanie Plina e #

CR2E034 (12/95)