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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000081917 (3)

GRASSMASTER LAWN SERVICE, INC.

Principal Place of Business				Mailing Address							***************	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
854 HAND AVE SARASOTA FL 34232				i hand ave Rasota FL 34232-61	732							
									3. Date Incorporated or Qualif 10/23/1995		Date of Last <b>I</b> <b>/30/1996</b>	Report
2. Principal Place of Business			2a. Mailing Address					4. FEI Number		A	pplied For	
21			26						65-0614776			ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	, 🗆	T	Additional
City & State			City & State						<del> </del>		tequired	
23			28					6. Election Campaign Financin Trust Fund Contribution	<sup>19</sup> []		May Be to Fees	
Zip		Country		Zip		ountry			8. This corporation has liability	for intendib		
24	25	•	29	,	30	•			Florida Statutes	Yes		0. 100.002
.=		Address of Curre		tered Agent		7			10. Name and Address of New	v Registered	d Agent	
RUB	IN, ALAN					81	Nam	е				
854	HAND AVE					82	Stree	et Addre	ss (P.O. Box Number is Not Acce	eptable)	• • • • • • • • • • • • • • • • • • • •	
SAR	ASOTA FL 3423	32										
						83						
						84	City				<b>85 Z</b> ip	Code
		10 - 1 - 007 00		7 4000 50-54- 00-						F	<u> </u>	See was latered
office or r	to the provisions ( egistered agent, (	or Sections 607.05 or both, in the Stal	suz and 60 ite of Florid	oz. 1508, Fiorida Sta la. Such change wa	uuies, me as authori:	abovo zed by	e-name y the co	ea corpo orporatio	oration submits this statement for on's board of directors. I hereby a	ine purpose iccept the ap	or changing i opointment as	ns registered s registered
agent. I a	m familiar with, ar	nd accept the obli	igations of,	, Section 607.0505,	, Florida S	tatules	c c				_	
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·	Signature, typed or prin	of FICERS A		if applicable {	NOTE: Registe	cred Age		оте годинес	d when renstating)  ADDITIONS/CHANGES TO C	DATE		
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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 annual 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 corporation or the receiver or trusted 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.

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**FILED** 

Apr 14 1997 8:00am

Secretary of State