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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P95000087778 (3)

ISLAI	NDER LAWN SERVICE INC.			A IRANGEL IN SERVICE ACTIVITY AND THE PARTY	
Principal Pi	ace of Business	Mailing Address		- 1 00 Q\$	I ABAHA MABAH MABAH MABAH MABAH
1151 NW 76 AVE 1151 NW 76 /		1151 NW 76 AVE			
PLANTATION FL \$3322 PLANTATION FL 33322		PLANTATION FL 33322		DO NOT WRITE IN TH	IIC CDACE
				3. Date Incorporated or Qualified	110 OF ACE
[11/15/1995	
2. Principa	Il Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0624854	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22				5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 Name and Address of Curre		30	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
<u> </u>		ur vedisteren wägtir	B1 Name	10. Name and Address of New Register	ea Agent
PAREDES, MANEUL 1151 NW 76 AVE					
PLANTATION FL 33322			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
•	LANIATION PL 33322		83		
]					
			84 City		Zip Code
11. Pursua	int to the previsions of Sections 607.056	02 and 607.1508, Florida Statuter	s, the above-named corp		
office of	or registere d agent, or both, in the State	e of Florida, Such change was au actions of Section 607,0505, Flor	Ithorized by the corporati	oration submits this statement for the purposion's board of directors. I hereby accept the	appointment as registered
SIGNATUR		javora or, adolor og .cooo, mor	iou ototoo.		
SIGNATUR	Signature, typoid or pointed name of registered ag	y et and title if applicable (NOTE	Registered Agent signature require	ed when reinstating) DAT	E
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	Pancara Manus	DELETE	1.1 TOTLE		Change Addition
NAME	PAREDES, MANUEL		1.2 NAME		
STREET ADDRES	;		1.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33322	DELETE	1.4 CITY-ST-ZIP		Change D 1460in
TITLE	PAREDES, ANGELA	ר"ו מנוינונ	2.1 TITLE		L Change L Addition
} ·	4424 1811 - 414		2.2 NAME		
STREET ADDRES	PLANTATION FL 33322		2.3 STREET ADDRESS	· 1	
CITY-ST-ZIP	VP	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	PAREDES, ROSA		3.2 NAME		
STREET ADDRESS	4484 4844 8681 41481 8148		3.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33322		3.4 CITY-ST-ZIP		
TITLE	T	DELETE	4.1 TITLE		Change Addition
NAME	PAREDES, MANUEL M		4. 2 NAME		
STREET ADDRES	s 1151 NW 76TH AVENUE		4.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33322		4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRES	ss		5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		·
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRES	SS		6.3 STREET ADDRESS		
CITY-ST-ZIP	_ <u> </u>		6.4 CITY - ST - ZIP		

14. Thereby 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 oath; 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.

SIGNATURE:

MANUEL PAREDES

4/15/98

(954) 424 3472

FILED

May 01 1998 8:00am

Secretary of State