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

PROFIT CORPORATION **ANNUAL REPORT**

1998

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000097546 (2)

S.A. SCHWARTZ LANDSCAPING SERVICES INC.

<u></u>									-		
Principal Place of Business Mailing Address											
18371 CORAL CHASE DR 18371 CORAL CHASE DR						R					
BOCA RATON FL 33498					BOCA RATON FL 33498				DO NOT WRITE IN THIS SPACE		
]									3. Date Incorporated or Qualified		
]									12/21/1995		
2. Principal Place of Business 2a. Mailing Ad						Address			4. FEI Number Applied For		
<u> </u>					26				59-3353771 Not Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.				— \$2.75 Additional		
					27				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	ip Country			Zip		Country		8. This corporation owes or has paid the current year Intangible			
24		25		29	_	30			Personal Property Tax due June 30. 🖊 Yes 🗌 No		
9. Name and Address of Current Registered Agent							1		10. Name and Address of New Registered Agent		
SOTIMATIZACIONES TO TO TO							81	Nampe V	vel A Schuartz		
18371 CORAL CHASE DR							82 Street Address (P.O. Box Number is Not Acceptable)				
BOCA RATON FL 33498							Ш				
[83				
							84	City	85 Zip Code		
									<u> </u>		
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 office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered											
agent. I am familiar with, and accept the obligations of section 607.0505, Florida Statutes.											
SIGNATURE	X ('~,		11.16	1 1	/				1-10-98		
Diditatione	Signature, Typed	or prin	ed name of registered agen			F Rogister	od Age	nt signature required	t when reinstating) DATE:		
12.			OFFICERS AND	DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD		******		☐ DELETE	1.11	ITLE		☐ Change ☐ Addition		
NAME			SAMUEL A			1.21	IAME				
STREET ADDRESS		-	L CHASE DR			1.3 9	STREET	ADDRESS	,		
CITY-ST-ZIP		AT0	N FL 33498			1.4 0	OITY-S	T - ZIP			
TITLE	VSTD				DELETE	211	ITLE		Change Addition		
NAME SCHWARTZ, DIANE L					22 N						
STREET ADDRESS 18371 CORAL CHASE DR						2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP BOCA RATON FL 33498					2.40			iT - ZiP			
TITLE					DELETE	3.1 T			Change Addition		

CITY-ST-ZIP 14. I 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 oath; that I am an officer or director of the corporation or the receiver or project 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 any attraction of the corporation of the co

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY - ST - ZIP

3.4. CITY - ST- ZIP

Change

☐ Change

1.10.92

Addition

Addition

Addition

FILED

Jan 27 1998 8:00am

Secretary of State