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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600003155 (4)

GREEN MEADOWS LAWN SERVICE INC.

Principal Place of Business	Mailing Address				
7910 SW 17TH STREET	7910 SW 17TH STREET				
MIAMI FL 33155	MIAMI FL 33155-1316				

## FILED May 12 1997 8:00am Secretary of State



MIAMI FL 33155	MIAMI FL 33155-1316								
		4		3. Date Incorporated or Qualified 3a. Date 01/08/1996			ate of Last Report		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	· <del></del>		Applied For		
21	26			65-0635668			Not Applicab		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			75 Additional e Required		
City & State	City & State			Election Campaign Financing     Trust Fund Contribution			.00 May Be ded to Fees		
Zip Country <b>25</b>	Zip	Country			Yes 5	No	ler s. 199.032,		
9, Name and Addres	s of Current Registered Agent			10. Name and Address of New Reg	jistered /	gent			
Tejera, Luis		81	Name	•					
7910 SW 17TH STREET		82	Street Ado	ress (P.O. Box Number is Not Acceptab	le)		~		
MIAMI FL 33155									
		83							
		84	City		FL	85	Zip Code		
	ons 607,0502 and 607,1508, Florida Statutes, in the State of Florida. Such change was auth			C		<u> </u>			
agent. I am familiar with, and acce SIGNATURE	ept the obligations of, Section 607.0505, Florida	a Statutes	<b>3</b> .	wired when reinstating)	DATE				
	FICERS AND DIRECTORS	13.	ng signature requ	ADDITIONS/CHANGES TO OFFIC		DIREC	TORS IN 12		
MLE President		1.1 TITLE		7.00.17.01.07.01.10.00.10.07.11.0		☐ Cha			
NAME 1.16 TO	ero	1.2 NAME	}						
STREET ADDRESS 7010 GO	17 ST	1.3 STREET	ADDRESS						
CHY-SI-ZP Miami F	1 33155	1.4 CITY-S	T-ZIP			_			
THE HVICE- Pre	esident Delete	21 TITLE				Cha	nge 🔲 Additio		
NAME Maria T.	rejerg	2.2 NAME							
STREFT ADDRESS 79 10 5W	77 5	23 STREET	ADDRESS	· ·	• 4				
CITY-SI-21F MIAMI,	FI 3315T	2 4 CITY-S 31 THILE	ST-ZiP			Cha	nge Additio		
TITLE	m perese	3.2 NAME	ì			L UIA	iide [""] vooitiir		
STREET ADORESS		3 3 STREET	Annosss	· ·					
CITY-ST ZIP		3.4. CITY - S							
TITLE	☐ DELETE	4.1 TITLE	77 211			Cha	nge 🔲 Additio		
NAME		4. 2 NAME	}						
STHEFT ADDRESS		4.3 STREET	ADDRESS						
C(1) Y - ST - Z(6)		4.4 CITY - S	T-ZIP						
TIPLE	☐ DELETE	5.1 TITLE				Cha	nge 🔲 Additio		
NAME	ļ	5.2 NAME							
STREET ADDINESS		5.3 STREET							
C-TY - ST - 74P	DELETE .	5.4 CITY - S	T-ZIP		<u> </u>	Cha	nge 🔲 Additio		
THE	TT herete	61 TITLE				LLLI UN	iiAa 🗂 Wüülü(		
NAME CONTRACTOR	i	6.2 NAME	4000ECC						
STREET ADDRESS		6.3 STREET							
ČiTY - ST - 7IP		6.4 CITY - S	1-217	d in Control 440 07/01/1 Elected Control					

4. 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 oath; that I arm 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

MALLA DE LA CHERT OF OFFICER OF ORECTOR

4/27/97 (305)2673005