PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

JOCUMENT # PS 1. Corporation Name JOHN CANTRELL LAWN S							
Principal Place of Business Mailing Address				- COMPLETED THE COLUMN DELIES RADIAL MANIST MANISTER			
15724 SW 153RD AVENUE MIAMI FL 33187	15724 SW 153RD AVENUE MIAMI FL 33187				DO NOT WRITE IN THIS SPAC		
				3. Date Incorporated or Qualifed 02/12/1996	THIS STATE		
Principal Place of Business	26	2a. Mailing Address 26					
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.		
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5 Ad		
Zip Country	29	Country 30		8. This corporation owes the current year Intangible Personal Property Tax.			
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
CANTRELL, GEORGE	n Algebra (Alleger 1964) (1964) Albandaren aldaria	81	Name				
15724 SW 153RD AVENUE		82	Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33187		83	-				
·	•	84	City	/	FI 85		
.11. Pursuant to the provisions of Section office or registered agent, or both, agent. I am familiar with, and acce	ons 607.0502 and 607.1508, Florida Statute in the State of Florida. Such change was aupt the obligations of, Section 607.0505, Flori	s, the above thorized by ida Statutes	-named corthe corpora	rporation submits this statement for the purporation's board of directors. I hereby accept the a	- <u>- </u>		
SIGNATURE							
			t signature requi	red when reinstating) DAT			
	FICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRE		
TITLE D	☐ DELETE	1.1 TITLE		2.5 Sept. 15.5	☐ Ch:		

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90016 002 ***150.00



T WRITE IN THIS SPACE

Applied For Not Applicable \$8.75 Additional

□No

Fee Required

\$5.00 May Be Added to Fees

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15724 SW 153RD AVENUE			82	Street /	Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL 33187				No to a technique in the case of any of the						
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			84	City	4-28/11/14/1/73	85 Zip (25.2 (5) (1.4) 26d6			
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11. Pursuant	to the provisions of Sections 607.0502 and 607.1	508, Florida Statute	s, the above	e-named	corporation submits this statement for th	e purpose of changing its	registered			
onice or i	registered agent, or both, in the State of Florida. S am familiar with, and accept the obligations of, Sec	uch change was au	thorized by	the corpo	pration's board of directors. I hereby acc	ept the appointment as req	gistered			
SIGNATURE										
• •	Signature, typed or printed name of registered agent and title if appli			t signature re	equired when reinstating)	DATE				
12.	OFFICERS AND DIRECTO		13.		ADDITIONS/CHANGES TO O	FFICERS AND DIRECTO	RS IN 12			
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition Addition			
VAME	CANTRELL, GEORGE		1.2 NAME	}						
STREET ADDRESS	15724 SW 153RD AVENUE		1.3 STREET	ADDRESS						
CITY-ST-ZIP	MIAMI FL 33187		1.4 CITY+S	r-ZIP	. •					
ITLE		☐ DELETE	2.1 TITLE		- 10	☐ Change	☐ Addition			
NAME	.		2.2 NAME			_ ,	_			
STREET ADDRESS			2.3 STREET	ADDRESS						
CITY-ST-ZIP]		2. 4 CITY-S			•				
TILE .		☐ DELETE	3.1 TITLE	1-21		☐ Change	Addition			
IAME (3.2 NAME							
TREET ADDRESS	開新 は、呼上 おしてき コープ		3.3 STREET	ADDDECO						
CITY-ST-ZIP	海护 他,C						13.13			
TILE		☐ DELETE	3.4. CITY-S	I-ZIP		Change	- 3 € 10 € 10 € A 3 = 14 10 €			
IAME .		IN DELETE .			·	Change □	N Addraion			
	K. Carlotte and the control of the c		4. 2 NAME							
TREET ADDRESS	•		4.3 STREET	ADDRESS	•					
ITY-ST-ZIP			4.4 CITY-ST	-ZIP						
TLE		☐ DELETE	5.1 TITLE	1		☐ Change	☐ Addition			
AME	•		5.2 NAME .	ľ		•				
TREET ADDRESS	-,		5.3 STREET	ADDRESS						
ITY-ST-ZIP	No. 1 to the second sec		5.4 CITY-ST	-ZIP	* * * * * * *	· · .				
mle j	ANTE ATELOTE A TELOTONICA	☐ DELETE	6.1 TITLE			☐ Change	Addition			
AME CONTRACT	appropriate the second		6.2 NAME			•	-			
TREET ADDRESS	1 Phone San Angel A		6.3 STREET	ADDRESS	•					
ITY-ST-ZIP	Market in a seat the		6.4 CITY-ST	-ZIP						
4. I hereby c	ertify that the information supplied with this filing d	oes not qualify for t	he exemption	n stated	in Section 119.07(3)(i), Florida Statutes.	I further certify that the in	formation			
ingicated (on this annual report or supplemental annual report	rt is true and accura	ite and that	my signa	ture 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, with all other like empowered.