


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

FILED

Feb 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000014436 (5)

1. Corporation Name
BULLDOG LANDSCAPING, INC.

Principal Place of Business	Mailing Address
603 EAST COMMERCE WAY, SUITE 15 JUPITER FL 33458	603 EAST COMMERCE WAY, SUITE 15 JUPITER FL 33458



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 13676 152nd Rd. North		26 13676 152nd Rd. North		02/12/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0647918	
City & State		City & State		5. Certificate of Status Desired	
23 Jupiter, FL 33478		28 Jupiter, FL 33478		X \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24 33478		29 33478		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
25 USA		30 USA		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

OLLIVIER, JULIEANNE L
603 EAST COMMERCE WAY
SUITE 15
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name	same
82 Street Address (P.O. Box Number is Not Acceptable)	13676 152nd Rd. North
83	
84 City	Jupiter
85	FL
Zip Code	33478

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 conditions of, Section 607.0505, Florida Statutes.

SIGNATURE Julianne L. Ollivier President DATE 1/28/98

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OLLIVIER, JULIEANNE L	1.2 NAME	P/T Julieanne L. Ollivier
STREET ADDRESS	603 EAST COMMERCE WAY, SUITE 15	1.3 STREET ADDRESS	13676 152nd Rd. North
CITY-ST-ZIP	JUPITER FL 33458	1.4 CITY-ST-ZIP	Jupiter, FL 33478
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	V/S David R. Ollivier
STREET ADDRESS		2.3 STREET ADDRESS	13676 152nd Rd. N.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Jupiter, FL 33478
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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: Julianne L. Ollivier President DATE 1/28/98 561-575-5296

CR2E034 (10/97)