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

Mailing Addross

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 23 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000014783 (0)

ENVIRO LAWN & LANDSCAPE, INC.

Curcibar Liace	OI DUSTITUSS	Mailing Address			1	
14129 DRAKES POINT DRIVE 14129 DF JACKSONVILLE FL 32224 JACKSON						
					DO NOT WRITE IN THIS	SPACE
					<ol> <li>Date Incorporated or Qualified</li> <li>02/16/1996</li> </ol>	
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Transipari i	ace of Boshibso	26			59-3362323	Not Applicab
Sulte, Apt. i	# etc	Suite. Apt. #, etc.				\$8.75 Additional
2	., 515	27			5. Certificate of Status Desired	Fee Required
City & State	)	City & State			6. Election Campaign Financing	\$5.00 May Be
3		28			Trust Fund Contribution	Added to Fees
<b>Z</b> ip	Country	Zip	Country		8. This corporation owes or has paid the cu	<del></del>
4	25	29	30			Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent
BE	RMAN, BRUCE J		81	Name		
14129 DRAKES POINT DRIVE				Street Addre	ess (P.O. Box Number is Not Acceptable)	
JA	CK <b>S</b> ONVILLE FL 32224		82	Ollock Magne	oss (i .o. box riamber is riot Acceptable)	
			83			
			84	City		les l'a Code
			64	City	FL	85 Zip Code
11. Pursuant t	a the provisions of Sections 607.0502	and 607.1508, Florida St	atutes, the above-	named corpo	oration submits this statement for the purpose of	f changing its registere
office or re	egistered agent, or both, in the State of	of Florida. Such change w	as authorized by Florida Statutes	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as registered
		ions or, accitor day load	, Florida Statutes.			
SIGNATURE .	Sign hare, typed or printed to the off gits read agent	t and title if applicable	NOTE: Registered Agen	t signature require	od when reinstating) DATE	<u></u>
12.	OFFICERS AND		13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 12
TITLE	עוץ	DELETE	1.1 TITLE			Change Addition
NAME	BERMAN, BRUCE J		1.2 NAME	1		
STREET ADDRESS	14129 DRAKES POINT DRIVE		1.3 STREET A	DDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32224		1.4 City-St-	- ZIP		•
TITLE	VPS	DELETE	21 TITLE			Change Addition
NAME	BERMAN, HOLLY A		2.2 NAME			
STREET ADDRESS	14129 DRAKES POINT DRIVE		2.3 STREET A	DDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32224		2.4 CITY-ST	-ZIP		
TITLE		DELETE	3.1 TITLE			☐ Change ☐ Additi
NAME			3.2 NAME	}		
STREET ADDRESS			3.3 STREET A	odress		
CITY-ST-ZIP			3.4. CITY-ST			
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME						C CHANGE C TOOLIN
1			4.2 NAME			Onlings About
STREET ADDRESS			4. 2 NAME 4.3 STREET A	DDRESS		El change El Additi
			4.3 STREET A			Change Audum
CITY-ST-ZIP		☐ DELETE				
CITY-ST-ZIP		☐ DELETE	4.3 STREET A 4.4 CITY-ST- 5.1 TITLE			
CITY-ST-ZIP LITLE NAME		☐ DELETE	4.3 STREET A 4.4 CITY - ST- 5.1 TITLE 5.2 NAME	ZiP		
CITY-ST-ZIP  ITLE  NAME  STREET ADDRESS		☐ DELETE	4.3 STREET A 4.4 CITY - ST. 5.1 TITLE 5.2 NAME 5.3 STREET A	- ZIP DDRESS		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	4.3 STREET A 4.4 CITY - ST- 5.1 TITLE 5.2 NAME	- ZIP DDRESS		

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 chapter 6, or on an attachment with an address.

6.4 CITY - ST- ZIP

6.2 NAME

NAME