Applied For

\$8.75 Additional

Fee Required

Not Applicable

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000017367 1. Corporation Name

PERI'S LANDSCAPE, INC.

Philiopar Place of Busin
4256 DAVIS ROAD
LAKE MODTH EL 32461

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2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

4256 DAVIS ROAD LAKE WORTH FL 33461

2a. Mailing Address

Suite, Apt. #, etc.

26

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90148 024 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

02/23/1996 4. FEI Number

65-0651102

22		27			Fee Required	
City & State	9	City & State	· ·	6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year		
24	25	29 30		Personal Property Tax.	Yes No	
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Registe	red Agent	
			81 Name	FAN, T. MARTIN		
SLIZYK, PETER 4256 DAVIS ROAD LAKE WORTH FL 33461				ress (P.O. Box Number is Not Acceptable)	,	
			MARTIN & MARTIN TAX & ACCTNG INC.			
			83			
			84 City 85 Zip Code			
			Lake	WORTH	L 33463	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the above-named corp	poration submits this statement for the purpos	e 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 nereby accept the appointment as registered						
SIGNATURE						
12.	OFFICERS AN	ID PIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	₩ DELETE ·	1.1 TITLE DP K	laren Hill	Change X Addition	
NAME	SLIZYK, PETER		12 NAME 2	209 22nd Way vest Palm Beach, Fi. 3		
STREET ADDRESS	4256 DAVIS ROAD		1.3 STREET ADDRESS	Jest Palm Beach, Fl. 3.	3407	
CITY-ST-ZIP	LAKE WORTH FL 33461		1.4 CITY-ST-ZIP			
TITLE	But Hominite oo is	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS	,		
CITY-ST-ZIP			2 4 CITY-ST-ZIP	•		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
			3.4. CITY-ST-ZIP			
CITY-ST-ZIP TITLE		□ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4, 2 NAME	•		
STREET ADDRESS			4.3 STREET ADDRESS			
ì			4.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
			5.3 STREET ADDRESS			
STREET ADDRESS			5.4 CITY-ST-ZIP		•	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
			6.2 NAME			
NAME	See S. See		6.3 STREET ADDRESS			
STREET ADDRESS	The section of		6.4 CITY-ST-ZIP			
CITY-ST-ZIP		ith this filing slope and smaller for the		Section 119 07/3\/i) Florida Statutas I furtha	r certify that the information	
14. I hereby of indicated	certify that the information supplied wo on this annual report or supplementa	ith this filing does not quality for the all annual report is true and accurat	e exemption stated in e and that my signatur	Section 119.07(3)(i), Florida Statutes. I furthe re shall have the same legal effect as if made	under oath; that I am an	

officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Block 12 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

1 are SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR