


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

FILED  
May 14 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P96000022210 (4)</b> 1. Corporation Name <b>JIMMY'S LAWN SERVICE, INC.</b>					
Principal Place of Business <b>14812 SW 170TH TERRACE MIAMI FL 33187</b>			Mailing Address <b>14812 SW 170TH TERRACE MIAMI FL 33187</b>		
2. Principal Place of Business 21 <b>191 NW 97 Ave.</b> Suite, Apt. #, etc. 22 <b>Apt # 317</b> City & State 23 <b>Miami FL</b> Zip 24 <b>33172</b>		2a. Mailing Address 26 <b>191 NW 97 Ave</b> Suite, Apt. #, etc. 27 <b>Apt # 317</b> City & State 28 <b>Miami FL</b> Zip 29 <b>33172</b>		3. Date Incorporated or Qualified <b>03/08/1996</b> 4. FEI Number <b>65-0655655</b> 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>OLIVAS, JAIME 14812 SW 170TH TERRACE MIAMI FL 33187</b>			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code		
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 obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	<b>OPV OLIVAS, JAIME</b>	<b>14812 SW 170TH TERRACE</b>	<b>MIAMI FL 33187</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<b>DST OLIVAS, KARLA</b>	<b>14812 SW 170TH TERRACE</b>	<b>MIAMI FL 33187</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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SIGNATURE:

*Jaime Olivas* 278-2899  
04-28-98 278-1197

CR2E034 (10/97)