

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

**FILED**  
**Apr 20, 1999 8:00 am**  
**Secretary of State**

04-20-1999 90242 034 \*\*\*150.00

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P96000046805**

1. Corporation Name  
**B & J LAWN AND LANDSCAPING, INC.**

Principal Place of Business: 916 NW 4TH ST, BELLE GLADE FL 33430, US  
 Mailing Address: POB 1936, BELLE GLADE FL 33430, US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/28/1996**  
 4. FEI Number: **65-0679919**  
 Applied For:  Applied For,  Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
 8. This corporation owes the current year Intangible Personal Property Tax:  Yes,  No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-fields for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent  
**RHODES, JANET G.**  
**916 NW 4TH STREET**  
**BELLE GLADE FL 33430**

10. Name and Address of New Registered Agent (81-85)  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City  
 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  
 1.1 TITLE: **D**  DELETE  
 1.2 NAME: **RHODES, EUGENE B.**  
 1.3 STREET ADDRESS: **915 NW 4TH STREET**  
 1.4 CITY-ST-ZIP: **BELLE GLADE FL 33430**  
 2.1 TITLE: **D**  DELETE  
 2.2 NAME: **RHODES, JANET G.**  
 2.3 STREET ADDRESS: **915 NW 4TH STREET**  
 2.4 CITY-ST-ZIP: **BELLE GLADE FL 33430**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 3.1 TITLE:  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP  
 4.1 TITLE:  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP  
 5.1 TITLE:  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP  
 6.1 TITLE:  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 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, with all other like empowered.

SIGNATURE: Janet G. Rhodes **SIGNATURE REQUIRED**  
 4-14-99 561-996-7863  
 Date Daytime Phone

CR2E034 (11/98)