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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

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DOCUMENT # P96000058251 (5)

## FILED Apr 23 1998 8:00am Secretary of State

1. Corporati	SEY LANDSCAPE & DESIGN	), INC.						
Principal Place of Business Mailing Address					{			
11420 FORTUNE CIRCLE BAY 136 6845 ASHTON ST. WELLINGTON FL 33414 BOYNTON BEACH FL 33			437		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	STACE	<del></del> 1	
					07/10/1996			
2. Principal	Place of Business	2a. Mailing Address	_		4, FEI Number	App	lied For	
21		26			59-3388879		Applicable	
Suite, Apl	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Ac	ditional		
22		27		5. Certificate of Status Desired	Fee Req	uired		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
<b>23</b> Zip	Country	28	Countrie		Trust Fund Contribution	Added to		
24	25	Zip 29	Country 30		8. This corporation owes or has paid the co	urrent year Intar		
24	9. Name and Address of Curren		<u> 30 </u>		Personal Property Tax due June 30.  10. Name and Address of New Registered		INO	
М	ANNELLO, ANTHONY M		81 N	lame				
	) VIA DE CASAS NORTE		20 0	4 <b>6</b> -1-1-				
BOYNTON BEACH FL 33426			<b>82</b>   S	treet Addre	ess (P.O. Box Number is Not Acceptable)		}	
ψ.	STITION BEAGIN TE GOVED		83					
			84 C	ity				
				ну	FI	L 85 Zip Co	age	
agent. I	am familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, Fl	tes, the above-na authorized by the orida Statutes.	amed corpo e corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its pointment as re	registered egistered	
SIGNATURE	Signature, typed or printed name of registered ager	nt and liftle if applicable (NO	F: Registered Agent se	gnature require	d when reinstating) DATE		,	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS	IN 12	
TITLE	PD	■ DELETE	1.1 TITLE			Change	Addition 3	
NAME	MANNELLO, ANTHONY M		1.2 NAME				7	
STREET ADDRESS	10 10 10 10 110 110 110		1.3 STREET ADD	RESS			ļį.	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	T pourse	1.4 CITY-ST-ZI	P			<del></del> }	
TITLE	SD MANUELLO MANDIO	☐ DELETE	2.1 TITLE	}		L Change	Addition	
NAME	MANNELLO, MARIO 6845 ASHTON ST.		2.2 NAME					
STREET ADDRESS	BOYNTON BEACH FL 33437		2.3 STREET ADD					
CTTY-ST-ZIP TITLE	BOTHTON BEACH FL 33437	DELETE	2. 4 CITY-ST-ZI 3.1 TITLE	IP				
NAME		C) Merit	O.I MILE			Change	Addition	
STREET ADDRESS			3.2 NAME			Change	Addition	
•			3.2 NAME 3.3 STREET ADD	BESS		Change	Addition	
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CITY+ST-ZIP TITLE		DELETE		- 1				
		☐ DELETE	3.3 STREET ADD 3.4. CITY-ST-ZI	- 1			Addition  Addition	
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4. I hereby certify that the information supplied with this fling 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 cath; that I am an officer or director of the corporation or the recoiver 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.

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maria Manuello - 1

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