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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000065659 (0)

CARDINAL LANDSCAPING SERVICES OF TAMPA, INC.

Principal Place of Business

Mailing Address

15721 GARDENSIDE LANE TAMPA FL 33624

SIGNATURE:

15721 GARDENSIDE LANE TAMPA FL 33624

DO NOT WRITE IN THIS SPACE

3-10-78 813-948-9392

**FILED** 

Mar 19 1998 8:00am

Secretary of State

3. Date Incorporated or Qualified

					08/06/1996				
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number		Applied	For		
1		26	26		59-3394554	Not Applica		olicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		6. Certificate of Status Desired	□ \$ <b>8</b>	3.75 Additio	onal		
22		27		b, Certificate of Status Desired	, i	Fee Require	rd		
City & State		City & State	City & State		6. Election Campaign Financing	\$	5.00 May	Re	
23		28	28		Trust Fund Contribution		Added to Fee		
Zip	Country Zip		Coun	try	8. This corporation owes or has pa				
24	25 29 30		30		Personal Property Tax due June 30. Yes No				
<del></del>	g. Name and Address of Curren	t Registered Agent	1227		10. Name and Address of New Re				
MOONEY, MARK F									
13907 N. DALE MABRY HWY. #201 TAMPA FL 33618									
				Street Address (P.O. Box Number is Not Acceptable)					
				83					
				84 City 85 Zip Code					
				FL 18 25 0000					
11. Pursuant to the provisions of Sociens 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									
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agcept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
Signature, typed or printed name of registrated egent and tale it applicable (NOTE Registered Agent argnature required when reinstating) DATE									
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC				
TITLE	P	DELETE	1,1 TITL	Ε		ا ا	change [_]	Addition	
NAME	MANTEI, MICHAEL		1.2 NAN	iE [				• 1	
STREET ADDRESS	1135 WISPER RHN CT		1.3 STR	EET ADDRESS				}	
CITY-ST-ZIP	LHT FL 33549		1.4 CITY	1-ST-ZIP	· · ·			· 1	
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NAME	Mantei, Mark S		2.2 NAM	IE				i	
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CITY-ST-ZIP	TAMPA FL 33624			Y-ST-ZIP				ì	
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NAME			6.2 NAM	<b>I</b>					
STREET ADDRESS			- 6	EET ADDRESS				- 1	
							•		
CITY-ST-ZIP	ertify that the information supplied w	ith this filma does not an diffu f	or the even	notion stated	in Section 119 07(3)(i) Florida Statutes I	further certify	hat the infor	mation	
14. I hereby certify that the information supplied with this filing does not quilify 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 or the secure of the corporation or the receiver of whether the same legal effect as if made under oath; that if am an officer or director of the corporation or the receiver of whether the same legal effect as if made under oath; that if am an officer or director of the corporation or the receiver of which same appears in Block 13 if changed, or on any legal of the same appears in the same legal effect as if made under oath; that if a man of the same legal effect as if made under oath; the same legal effect as if made under oath; that if a man of the same legal effect as if made under oath; that if a man of the sa									