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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

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Feb 04 1997 8:00am

Secretary of State

128/97 (561) 736-6094

96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000067625 (9)

CASTLE LANDSCAPING INC.

9200 MILITRY TRAIL. #029 9200 MILITRY TRAIL. #029 **BOYNTON BEACH FL 33436** BOYNTON BEACH FL 33436-7039 3. Date incorporated or Qualified Sa. Date of Last Report 08/08/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0687254 Not Applicable 26 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing П Added to Fees 23 28 Trust Fund Contribution Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name DECHENE, ANDRE 9200 MILITRY TRAIL, #029 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33436** 83 84 City 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) Signature, typnd or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change Addition D DELETE 1.1 TITLE TIFCE DECHENE, ANDRE 1.2 NAME NAME 9200 MILITRY TRAIL, #029 1.3 STREET ADORESS STREET ADDRESS **BOYNTON BEACH FL 33436** 1.4 CITY-ST-7IP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE DECHENE, NICOLE 2.2 NAME NAME 9200 MILITRY TRAIL, #029 2.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33436** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.5 TITLE TITLE DECHENE, MARIO NAME 3.2 NAME 9200 MILITRY TRAIL, #029 3.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33436** 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS**

6.4 CITY - ST - ZIP

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

14. I do 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

INING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: