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

**PROFIT CORPORATION** ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998 DOCUMENT #

P97000010472 (3)

**VISTA NURSERY & LANDSCAPING, INC.** 

## **FILED** Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								100 (18) (80)	
18100 SW 248		18100 SW 248 ST							
MIAMI FL 33031		MIAMI FL 33031			DO NOT WRITE IN THIS SPACE				
					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
						01/29/1997			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number - A - A - A	Ar	plied For	
21 182		28. Mailing Address 28. 18220 5 W. 2005t.			١,	65-0129059		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75		
22 M		27				5. Certificate of Status Desired	Fee Re	quired	
City & State		City & State		-loviv	h	6. Election Campaign Financing	\$5.00		
23 Miami, Fl		28 MIAMI		101 10	<u>u</u>	Trust Fund Contribution L.	Added 1		
Zip 241 331 87	Country 25 1/SR	20 22 197 E	Coun	<u>~</u> 1		8. This corporation owes or has paid the c		angible No	
24 3318 1	9, Name and Address of Current		30 1	1		Personal Property Tax due June 30.  10. Name and Address of New Registerer		1110	
SERRANO, JORGE									
18100 SW 248 ST									
	MI FL 33031		82 Street Add			ss (P.O. Box Number is Not Acceptable)			
	un ( E 0000 )		83				_		
			L	M 02:					
				City		F	L  85   Zip (	Code	
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the ab	ove-named	corpo	pration submits this statement for the purpose	of changing it	s registered	
office or re agent. I an	i <b>gistered age</b> nt, or both, in the State c n <b>fam</b> iliar with, and accept the obligat	# Florida. Such change was au ions of, Section 607.0505, Flor	itnorized ida Statu	by the corp tes.	oorano	on's board of directors. I hereby accept the ap	opointment as	registerea	
SIGNATURE	-								
UIGHT OILE	Signature, typed or printed name of registered agent			Agent signature	required	d when re-instaling) DATE			
12.	OFFICERS AND		13.		r	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTOR Change	S IN 12 Addition	
TITLE	D Serrano, Jorge	☐ DELETE	1.1 TITL				Change	Addition	
NAME	18100 SW 248 ST		1.2 NAM		10	220 6.W 200	4		
STREET ADDRESS	MIAMI FL 33031			EET ADDRESS		liami, Fl 3318	7' '		
CITY-ST-ZIP TITLE	0	☐ DELETE	2.1 TITE	(-ST-ZIP	IV.	1141111 1 1 2910	Change	Addition	
NAME	SERRANO, DEBORAH		2.2 NAN		_	-	7		
STREET ADDRESS	18100 SW 248 ST			EET ADDRESS	18.	220 S.W. 200:	st		
CITY-ST-ZIP	MIAMI FL 33031			Y-ST-ZIP	Ň	Mami Fl 331	87.		
TITLE		DELETE	3.1 TITL				Change	Addition	
NAME			3.2 NAN	1E					
STREET ADDRESS			3.3 STR	EE1 ADDRESS					
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP					
TITLE		☐ DELETE	4.1 TITL	E			Change	☐ Addition	
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EET ADDRESS					
CITY-ST-ZIP				/-ST-ZIP		1			
TITLE		☐ DELETE	5.1 TITU	E			L Change	Addition	
NAME			5.2 NAN						
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP		DELETE	5.4 CIT 6.1 TITU	r-ST-ZIP	ļ		Change	Addition	
TITLE NAME		☐ bittit	6.2 NAN				டு அழை		
1				EET ADDRESS				-	
STREET ADDRESS				r-ST-ZIP					
14. I hereby co	ertify that the information supplied wit	h this filing does not qualify for	the exer	nption state	d in S	Section 119.07(3)(i), Florida Statutes. I further	certify that the	information	
indicated of	on this annual report or supplemental	annual report is true and accur	rate and	that my sig	nature requir	Section 119.07(3)(i), Florida Statutes. I further e shall have the same legal effect as if made ti ired by Chapter 607, Florida Statutes; and tha	under oath; tha it my name an	at I am an pears in	
Block 12 o	r Block 13 if changed or on in attac	nnent with an address.	100	I i	i.o.	1	латы ыр.		
	17 W/1	$\mathbf{n}$ in $\mathbf{n}$	· M	$\mathcal{M}\mathcal{M}$	n	D 1/15/98 206	MILL.F	MU	