PROFIT CORPORATION ANNUAL REPORT

1999

THIEM, EUGENE G JR.

STUART FL 34996

3181 SE DOMINICA TERRACE



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Mar 22, 1999 8:00 am **Secretary of State**

03-22-1999 90016 042 ***150.00

DOCUMENT # P97000010500

GREENSCAPES IMAGES, IN	C.
Principal Place of Business	Mailing Address
3181 SE DOMINCA TERRACE STUART FL 34996 US	P.O. BOX 8393 HOBE SOUND FL 33475-8393
	فعفجوها إرهام الماسي أأحا المستواد والسوا
Principal Place of Business 1	2a. Mailing Address 26 Po Box 1862
Suite, Apt. #, etc.	Suite, Apt. #, etc.

9. Name and Address of Current Registered Agent

Juite, Apt. #, ctc.		ı	Cuito, ripe. n	, 0.0.	
		27			
City & State		28	City & State	Cir	FL
Zip	Country	29	Zip 3499	١ [Country 30 USA

City & State	City	FL
3499	1 3	Country 0 USA

Applied For

Fee Required

\$5.00 May Be

Added to Fees

85 Zip Code

Not Applicable \$8.75 Additional

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

=01/29/1997 4. FEI Number

65-0727465

	8. This corporation owes the current	vear Intendible	
A	Personal Property Tax.	Yes	□No
	10. Name and Address of New Regi	istered Agent	
Name			
Street Addre	ss (P.O. Box Number is Not Acceptable)	

	•	84	City	FL 85 Zip Code
11.	Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a	bove	-named corporation submits this	statement for the purpose of changing its registered
	office or registered agent, or both in the State of Electica. Such change was authorized agent. I am familiar with, and recept the obligations of Section 607,0505. Florida State	o by i utes.	tne corporation's board of directo	ors. I nereby accept the appointment as registered

82

83

SIGNATURE	- Car/1/ 1/XI				}
		gistered Agent signature i		DATE	-
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI		
TITLE	D DELETE	1.1 TITLE	Same	Change	☐ Addition
NAME	THIEM, EUGENE G JR.	1.2 NAME	Same The		
STREET ADDRESS	7100 SE 138TH STREET	1.3 STREET ADDRESS	5754 SW 69 Th ST		
CITY-ST-ZIP	HOBE SOUND FL 33455	1.4 CITY-ST-ZIP	Palm City PL 34990	***	
TITLE	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME		2.2 NAME			,
STREET ADDRESS	real real contractions of the contraction of the contractions of the contractions of the contraction of the co	2.3 STREET ADDRESS	 	·	_
CITY-ST-ZIP		2. 4 CITY-ST-ZIP			
TITLE	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
City-St-ZIP		3.4. CITY-ST-ZIP			
TITLE	☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME	<u> </u>	4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS	,		
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	☐ DELETE	5.1 TITLE		Change	☐ Addition (
NAME		5.2 NAME	,		•
STREET ADDRESS		5.3 STREET ADDRESS			
C/TY-ST-ZiP	<u> </u>	5.4 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE		Change	Addition

6.4 CITY-ST-ZIP 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 of an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

561 286 3923