


FILED  
Jul 01 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000015156 (7)  
Corporation Name  
GREENSCAPE DESIGN OF THE PALM BEACHES, INC.



Principal Place of Business 5558 3RD RD LAKE WORTH FL 33467	Mailing Address 5558 3RD RD LAKE WORTH FL 33467
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DO NOT WRITE IN THIS SPACE

Principal Place of Business 21 5558 3rd		Mailing Address 26 Same		Date Incorporated or Qualified 02/11/1997
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		FBI Number 65-0729245
City & State 23 Lake Worth		City & State 28		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 24 33467	Country 25 PA	Zip 29	Country 30	Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No				Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

Name and Address of Current Registered Agent  
DWYER, PATRICK L  
5558 3RD RD  
LAKE WORTH FL 33467

Name and Address of New Registered Agent  
81 Name Pat Dwyer  
82 Street Address (P.O. Box Number is Not Acceptable) Same  
83  
84 City FL 85 Zip Code

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 Pat Dwyer  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DWYER, PATRICK L 5558 3RD RD LAKE WORTH FL 33467	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DWYER, SALLY L 5558 3RD RD LAKE WORTH FL 33467	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 on an attachment with an address.

CR2E034 (10/97)