| | E ON OR BEFORE 09/30/98: \$550 (IF | | | | | | 996. |
|--|--|------------------------------------|-------------------------|-----------------------|--------------------------------|----------------------|--|
| COF ANNU | PROFIT DRPORATION NUAL REPORT 1998 FLORIDA DEPART Sandra B. I Secretary DIVISION OF CO | | | | am e |) | FILED |
| DOCUMENT # pazononavias (a) | | | | | | 93 AUG 18 PH 1: 47 | |
| 1. Corporation | RD LANDSCAPE & DESIG | | • • | | | | COUNCIANT OF STATE TALLAHASSEE, FLORIDA |
| LIONIC | TID CANDOON! L & DEON | 311) IIIO | • | | | | |
| Principal Place of Business Mailing Address | | | | | | | r (Abnishe sin fikin fabri daris barn darn galla liffit bibdi srbin inde suit tali tādi |
| 5998 DEARBORN PLACE 6998 DEARBORN PLACE BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437 | | | | | | | |
| | | | | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified |
| | | - | . 484 4591 8 4441 | | | | 03/12/1997 |
| 2. Principal Place of Business | | | 2a. Mailing Address | | | | 4. FEI Number Applied For 65 - 0739 630 Not Applied be |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 5 Certificate of Status Desired \$8.75 Additional |
| City & State | | | 27 City & City | | | | Fee Required |
| 3 | | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip 4 | Country Zip 25 29 | | | 30 Cou | ntry | | 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No |
| | 9. Name and Address of Cur | rent Regis | tered Agent | | 81 | | 10. Name and Address of New Registered Agent |
| | d, Lisa B Dearb orn Place | | | | | Name | |
| | NTON BEACH FL 33437 | | | | 82 | Street Ad- | ddress (P.O. Box Number is Not Acceptable) |
| | | | | | 83 | | |
| | | | | | 84 | City | F1 85 Zip Code |
| 11. Pursuan | to the provisions of sections 607.0 | 502 and 60 | 07.1508. Florida Statut | es, the ab | ove- | named corr | reporation submits this statement for the purpose of changing its registered |
| office or | registered agent, or both, in the St am familiar with, and accept the ob | ate of Flori | da. Such change was | authorized | 1 by | the corpora | ration's board of directors. I hereby accept the appointment as registered |
| SIGNATURE | Signature, typed or printed name of registered | annut and tills t | H necketha All | OTC: Declara | | and signature r | required when reinstaling) DATE |
| 12. | OFFICERS | | | 13. | ed Aq | jeni signature re | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | D | | DELETE | 1.1 70 | ιĖ | | Change Addition |
| NAME | FORD, GAVIN | FORD, GAVIN 1998 DEARBORN PLACE | | 1.2 NA | 1.2 NAME 12 | | 2000026245827 |
| STREET ADDRESS | | | | | | ADDRESS | -08/25/98 0 1044023 |
| CITY-ST-ZIP TITLE | BOYNTON BEACH FL 33437 | | | 1.4 CIT | | ZIP | ****150.00 *****150 Addition |
| NAME | FORD, LISA | DELETE | | 2.2 NAME | | Change "[_] Addition | |
| STREET ADDRESS | ANAL DEADDODU DI ACE | | | | | ADDRESS | |
| CITY-ST-ZIP | BOYNTON BEACH FL 33437 | | | 2.4 CH | Y-ST | -ZIP | |
| TITLE | DELETE | | | 3.1 TIT | LE | | Change Addition |
| NAME | | | | | 3.2 NAME 3.3 STREET ADDRESS | | |
| STREET ADDRESS | | | | | | ľ | |
| CITY-ST-ZIP TITLE | DELETE | | | | 3.4 CITY-ST-ZIP 4.1 TITLE | | Change Addition |
| NAME | | | | 4.2 NA | 4.2 NAME | | 2 |
| STREET ADDRESS | | | | 4.3 ST | REET. | ADDRESS | |
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| TITLE DELETE | | | | 5.1 TITLE 5.2 NAME | | Change Addition | |
| IAME STREET ADDRESS | | | | | | ADDRESS | |
| CITY-ST-ZIP | | | | 5.4 CIT | | | - 0 |
| TITLE | · | | DELETE | 6.1 TIT | | | Change Addither |
| NAME | | | | 6.2 NA | | | Notice Medical Miles |
| STREET ADDRESS | | | | | | ADDRESS | A)IV |
| | i | | | 64.00 | v_CT. | -702 | |

6.4 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 of Aupplemental 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 corpogation or the receiver of 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 an an effective with an address.

9017376107

LISA FORD LANDSCAPE & DESIGN, INC.

6998 Dearborn Place ♦ Boynton Beach, Fiorida 33437 Phone 561-732-5623

August 03, 1998

Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom this may concern:,

I am writing this letter to you to explain an unfortunate situation that we have gotten into that was honestly out of our control. I hope you will take the time to read this with understanding and belief that we are honest, hardworking Americans, that are not out to take advantage of our government obligations.

My husband, Gavin and I started our own landscape and design business in the spring of 1997. Neither of us had any knowledge about taxes, IRS, which forms went where or why. To be assured that we had all of our "T's" crossed, we hired an accountant. We interviewed a few and decided on one that we both felt comfortable with. Our paperwork for the year ending 1997 was completed and we were satisfied with the results. First quarter of 1998 came around, he took care of that for us as well. Over the course of the first 3 months of 1998, we were sent several forms to fill out from the state and federal government. Our accountant advised us not to complete any paperwork without him seeing it first so he could explain what we were filling out and also to be sure that we had all the correct information included before sending it out. Gavin and were very impressed that our accountant was taking all of these extra steps to teach us as well as advise us

The months went by, calls were made to our accountant, appointments were set up, but he always re-scheduled or did not show. We had several items of paperwork for him to go over, including the one I am writing you about right now. Second quarter filing time came around, no sign of our accountant. We decided to find us a new person to take care of our business. We met with the new accountant right away, as he was going over the stacks of paperwork we had saved for advisement, he came across the Division of Corporation form, at which time It was already delinquent. We were unaware that we owed money because we always let our (old) accountant tell us everything that we needed to do before we did it.

I am asking you to please waive the delinquent fee for us and allow us to pay the original \$150.00. I know that we should probably be punished for being so ignorant, but I guess one of the lessons you learn in business is to not trust anyone with your important paperwork, figure it out or make a call yourself. I am sorry that this check is so late, I promise it will never happen again. We are enclosing the original amount due, in hope that you will understand our dilemma and believe that it was an honest mistake

Sincerely

Lisa Ford, President

Lisa Ford Landscape & Design, Inc.

enc.: 1