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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000044435 (0)

TOTAL FOLIAGE PLANT LEASING, INC.

FILED Feb 09 1998 8:00am Secretary of State



2742 N.E.		Mailing Address		ļ.				
	Z	2742 N.E. 4 STREET						
POMPANO B	BEACH FL 83062	POMPANO BEACH FE 3	NO BEACH FE 33062		DO NOT WRITE IN THIS SPACE			
	• •	\ \		3. Date Incor	porated or Qualified			
				05/16/	•			
2. Principal Pla	ace of Business	2a. Mailing Address /	- ed D		er er		Apr	plied For
21 [1]	ace of Business NW 513+Street N, etc.	26 /// NW	5/5t St	eet 65-	075131	4		Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			· ·			dditional
22		27		5. Certificate	of Status Desired		Fee Red	
City & Ctata		City & Ctolo		6. Election C	ampaign Financing	\$	5.00	May Be
23 FOR	T LAUDERDALE, FL	28 FORT LAUDER	COALE, F	Truet Fund	d Contribution		Added to	
Zip	T LAUDERVALE, FL	700	Country 30 USA	8. This corpo	oration owes or has pa	id the current y	ear Inte	ngible
24 333	09 25 USA	29 33305	30 C/S/A	Personal P	Property Tax due June			No
	9. Name and Address of Current	Registered Agent		10. Name and	Address of New Re	gistered Agen	t	
NA NA	WALTER\		81 Name	SIDNE	V SCH	P77		
advanta armeda				SIDNEY SCHATZ (Address (P.O. Box Number is Not Acceptable)				
₽¢	OMPANO BEACH PL 33062		0	(1.0. DOX 140	moor to recombine	,,,,,		
	and the second		83	1111 1/1	1515+5	5 	-	
	` '		84 City	1111 100	<i>/ </i>			
				EDRT / Ou	DERMALE		上깔일	709
11. Pursuant to	o the provisions of Sections 607.0502 ogistered agent, or both, in the State on in familiar with, and a doptione obligat	and 607.1508, Florida Statute	s, the above-name	d corporation submits t	his statement for the p	ourpose of char	nging its	registered
office or re-	registered agent, or both, in the State of	f Florida, Such change was au	uthorized by the co-	rporation's board of dire	ectors. I hereby accer	of the appointm	ient as r	egistered
		TOTAL COCCOST TO TROPOSCO POR CITADO	iou otatoles.		1	129/5	P	
SIGNATURE 5	Signature, typod or profest name of register if agent	and the diapplicable (NOTE:	Registered Agent signatu	re required when reinstating)	/	DATE	2	
12.	OFFICERS AND		13.	ADDITIONS	CHANGES TO OFFIC	ERS AND DIR	ECTOR!	3 IN 12
TITLE		DELETE	1.1 TITLE	P/S/7/0		120	Shange	☐ Addition
NAME	-JANKE, WALTER		1.2 NAME	CIDNEY SO	CHATZ			
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CITY-ST-ZIP	POMPANG BEACH FL 33062		1.4 CITY-ST-ZIP	SIDNEY SO III NW 3 Fort La	nderdalo	EC.	33.	309
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CITY-ST-ZIP				·]				
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14. Thereby certify that the information supplied with this sting does not qualify in the exemption stated in section (13-70), Florida Statutes. Intuition continuation indicated on this 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, in on an attachment with an address.

CICMATUDE.

Xh

1/29/98 (954) 772-0808