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 # P97000083588 (8)

GREEN DREAM LAWN SERVICE, INC.

Principal Place of Business

2. Principal Place of Business

2300 NORTH 20TH AVE.. #A HOLLYWOOD FL 33020

Mailing Address

2a. Mailing Address

2300 NORTH 20TH AVE. #A HOLLYWOOD FL 33020

FILED Jan 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 09/25/1997

21		26					65-0783490		ot Applicable	
Suite, Apt.	#, etc.		, Apt. #, etc.					_ '	Additional	
22		27					5. Certificate of Status Desired	,	ecuired	
City & Stat	е	City	& State				6. Election Campaign Financing	\$5.00	May Be	
23		28					Trust Fund Contribution		to Fees	
Zip	Country	Zip		Countr	ry		8. This corporation owes or has paid the curren	t vear in	tangible	
24	25	29		30			Personal Property Tax due June 30.		Ū No	
	9. Name and Address of Current	Registered	Agent				10. Name and Address of New Registered Ag-	ent		
TELLO, CARLOS					1	Name				
2300 NORTH 20TH AVE., #A					2	Street Addres	ss (P.O. Box Number is Not Acceptable)			
HOLLYWOOD FL 33020										
					3					
				84	4	City		_ =		
				104	•	City	FL	35 Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above							ration submits this statement for the purpose of ch	anging it	s 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										
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registored Agent signature required when reinstating) DATE										
12.	OFFICERS AND	DIRECTORS		13.	-		ADDITIONS/CHANGES TO OFFICERS AND DI	RECTOR	IS IN 12	
TITLE	DPT		DELETE	1.1 TITLE				Change	Addition	
NAME	TELLO, CARLOS			1.2 NAME						
STREET ADDRESS	2300 NORTH 20TH AVE., #A			1.3 STREE	T AD	DRESS			i	
CITY-ST-ZIP	HOLLYWOOD FL 33020			1.4 CITY-	ST- 2	ZIP }				
TITLE	DVS		DELETE	2.1 TITLE				Change	Addition	
NAME	CALDERON, SILVIA			2.2 NAME				•		
STREET ADDRESS	2300 NORTH 20TH AVE., #A			2,3 STREE	T AD	ORESS	,			
CITY-ST-ZIP	HOLLYWOOD FL 33020			2. 4 CITY -						
TITLE		-	DELETE	3.1 TITLE				Change	Addition	
NAME				3,2 NAME				•	_	
STREET ADDRESS				3.3 STREET	T AD	DRESS				
CITY-ST-ZIP				3.4. CITY-		· ·]	
TITLE			☐ DELETE	4.1 TITLE				Change	Addition	
NAME				4. 2 NAME			_	· · -		
STREET ADDRESS				4.3 STREET		DRESS				
CITY-ST-ZIP				4.4 CITY-S		i				
TITLE			DELETE	5.1 TITLE	J1-4			Change	Addition	
NAME				5.2 NAME			-			
STREET ADDRESS				5.3 STREET	T ADI	npree				
CITY-ST-ZIP				5.4 CITY-S						
TITLE			DELETE	6.1 TITLE	31-4	ar		Change	Addition	
NAME				6.2 NAME			D	Change		
STREET ADDRESS				6.3 STREET	ית ז	DOECC				
CITY-ST-ZIP										
	ertify that the information supplied with	this filing do	es not qualify for t	6.4 CITY-S	otice	r I	ection 119 07(3)(i) Florida Statutas I further continu	that the	information	
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 suppliemental 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										

indicated on this annual report of supplemental annual report is frue 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 ecceiver or trouble 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

SIGNATURE:

EQUIRED

01-06 98

927-75.31

5034 (10/97)