

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000083588

1. Entity Name
 GREEN DREAM LAWN SERVICE, INC.



Principal Place of Business
 2335 MCKINLEY STREET
 HOLLYWOOD, FL 33020 US

Mailing Address
 2335 MCKINLEY STREET
 HOLLYWOOD, FL 33020 US



02112004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 65-0783490 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TELLO, CARLOS
 2335 MCKINLEY STREET
 HOLLYWOOD, FL 33020

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

Date

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

U00000079513
 03/08/04-80069-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	TELLO, CARLOS
STREET ADDRESS	2335 MCKINLEY STREET
CITY - ST - ZIP	HOLLYWOOD, FL 33020
TITLE	DVS
NAME	TELLO, SILVIA
STREET ADDRESS	2335 MCKINLEY STREET
CITY - ST - ZIP	HOLLYWOOD, FL 33020
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Carlos J. Tello President. 03/01/04 (954) 927-7531.