May 05, 1999 8:00 am Secretary of State

05-05-1999 90168 028 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000107608

1. Corporation Name

EASY CUT LAWN CARE SERVICES INC

| LAGI O | OF EASIN CARE CENTICE | .0, 1110. | | | | NEC (1817 2818) (1818 2818) 2818 2818 (1818 1818) |
|---|--|-------------------------------------|--------------|------------------------|--|--|
| | | 10 (li Addres- | | | { | |
| Principal Place of Business Mailing Address | | | | | | |
| 2166 NEW YORK ST 2166 NEW YORK ST | | | | | | |
| WEST MELBOURNE FL 32904 WEST MELBOURNE FL 32904 | | | | | DO NOT WRITE I | N THIS SPACE |
| | | | | | 3. Date Incorporated or Qualifed | |
| ļ | | | | | 12/22/1997 | Į |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 | | 26 | | | 59-3488072 | Not Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | \$8.75 Additional |
| 22 27 | | | | | 5. Certifcate of Status Desired | Fee Required |
| City & State City & State | | | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Cour | itry | 8. This corporation owes the current | year Intangible |
| 24 | 25 | 29 | 30 | | Personal Property Tax. | ☐ Yes No _ |
| | 9. Name and Address of Curr | | | | 10. Name and Address of New Regi | stered Agent |
| | | | | 81 Name | |) |
| SHORT, RAYMOND E | | | | 82 Street Add | dress (P.O. Box Number is Not Acceptable) | |
| 2166 NEW YORK ST | | | | dz Sireet Auc | gress (F.O. Dox Number is Not Acceptable) | ` |
| WES | T MELBOURNE FL 32904 | | ŀ | 83 | | |
| ļ | · | | ļ | | | |
| | | | | 84 City | | FL 85 Zip Code |
| 11 Pursuant | to the provisions of Sections 607.0 | 502 and 607 1508. Florida Statut | es the ab | ove-named cor | poration submits this statement for the purp | pose of changing its registered |
| office or r | egistered agent, or both, in the Sta | ite of Florida: Such change was a | uthorized | by the corporat | tion's board of directors. I hereby accept the | e appointment as registered |
| agent. (a | m familiar with, and accept the obli | igations of, Section 607.0505, Fig | rida Statu | les. | | |
| SIGNATURE | Signature, typed or printed name of registered a | areat and title if applicable (NOTE | Registered / | agent signature requir | red when reinstating) | DATE |
| 12. | | AND DIRECTORS | 13. | <u></u> | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRECTORS IN 12 |
| TITLE | PVST | ☐ DELETE | 1.1 7111 | E | | ☐ Change ☐ Addition |
| NAME | SHORT, RAYMOND E | | 1 2 NAV | AE | | |
| STREET ADDRESS | 2166 NEW YORK ST | | 13 STE | EET ADDRESS | | |
| | WEST MELBOURNE FL 3290 | M | | Y-ST-ZIP | | |
| CITY-ST-ZIP TITLE | WEST INCEDIGINAL TE SESSE | ☐ DELETE | 2.1 TITI | | | Change Addition |
|) ' | | | 2.2 NA | i | | |
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| STREET ADDRESS | | | | ţ | | <u></u> |
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| NAME | | | | | | |
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| NAME | | | 4. 2 NA | ţ | | |
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| CITY-ST-ZIP | | The err | | Y-ST-ZIP | | ☐ Change ☐ Addition |
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| NAME | | | 5.2 NAI | | | |
| STREET ADDRESS | | | | REET ADDRESS ! | | } |
| CITY-ST-ZIP | | | | Y-ST-ZIP | | |
| TITLE | | ☐ DELETE | 61 TITI | .t | | ☐ Change ☐ Addition |

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 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 with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

64 CITY+ST-7IP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP