1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000020031

1. Corporation Name

IT'S A BEAUTIFUL LAWN, INC.

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90013 009 ***150.00



| Principal Place | e of Business | Mailing Address | | | ()65 105 110 | | | |
|------------------------|--|--------------------------------|-------------------------------|--|--|-----------------------------------|--|--------------|
| 9437 SW 51 CC | | 9437 SW 51 COURT | | | | | | |
| COOPER CITY I | OOPER CITY FL 33328 COOPER CITY FL 33328 | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | <u> </u> | Date Incorporated or Qu | | 3 OF AUL | |
| | | | |]. | 03/03/1998 | | | |
| 2. Principal Pl | ace of Business () | 2a. Mailing Address | | QA. | FEI Number | <u> </u> | —————————————————————————————————————— | plied For |
| 21 947 | 00 SW 51 (+. | 25 5 1 2 2 S | S.Flamir | when | 65-082 | M26 | No | t Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | Contract Con | | \$8.75 A | Additional |
| 22 | • | 国 井 つつ | \supset | 5. | Certificate of Status Des | ired 🗌 | Fee Re | quired |
| City & State | e | City & State | 1 0 0 | , 6. | Election Campaign Fina | ncing | \$5.00 | |
| 23 | ner City | 28 H. L. CU | <u>our care</u> | | Trust Fund Contribution | | Added t | o Fees |
| Zip | Country | 1 Zip 0.22 C | Country | | This corporation owes to | ie current year Ir | ntangible | |
| 24 555 | 25 37 WILL | 1 29 3 | 30 KY OUL | | Personal Property Tax. | N 5. /./ | | ₩No |
| | 9. Name and Address of Curren | t Registered Agent | 94 Name | | Name and Address of | New Registered | Agent | |
| BEIT | TER, MICHELE | | 81 Name | | | | | |
| 9437 SW 51 COURT | | | | | O. Box Number is Not A | cceptable) | | |
| COOPER CITY EL COOPE | | | | | SW D | L CA. | | |
| 000 | TEN ON TE GOOLO | | 83 | | | | | |
| | | | 84 City | L = 00 | = (1 : la 1 | E-1 | 85 Zip C | Code |
| | | | | ערבם | ruty | [] | | 22.92 |
| office or re | to the provisions of Sections 607.0502 egistered agent, or both, in the State of | nf Florida. Such change was a | uthorized by the corpo | comparation or control of the contro | n submits this statement pard of directors. I hereby | or the purpose of accept the appr | ointment as re | gistered |
| agent. I aį | m familiar with, and accept the obligat | ions of, Section 607.0505, Flo | rida Statutes. | . \ | Joule C | 110 | へl.一k | |
| SIGNATURE | Y Y M CARA ULL | MILLIAN | _ Mich | ele | M KCUTCI | <u> </u> | 711 | 1 |
| | Signature, typed or printed name of registered agen | | | required when r | einstating) ADDITIONS/CHANGES | DATE | ND DIRECTA | DS IN 12 |
| 12. | OFFICERS AN | D DIRECTORS | 13. | | ADDITIONS/CHANGES | O OFFICERS A | Change | Addition |
| TITLE | REUTER, THOMAS | C. Decere | 1.2 NAME | | | | | _ |
| NAME | 9437 SW 51 COURT | | 1.3 STREET ADDRESS | aus | 05W 51 | 괏. | | ļ |
| STREET ADDRESS | COOPER CITY FL 33328 | | 1.4 CITY-ST-ZIP | (C) | MY MAI 1 | 7,33° |) 28 | |
| CITY-ST-ZIP | D | ☐ DELETE | 2.1 TITLE | $\overline{\mathbf{u}}$ | to o d | <u> </u> | Change | Addition |
| TITLE | REUTER, MICHELE | Deca. 4 | 2.2 NAME | | · . | | | |
| NAME | 9437 SW 51 COURT | | 2.3 STREET ADDRESS | GUD | DSW 510 | \mathcal{A} | | |
| STREET ADDRESS | COOPER CITY FL 33328 | | | 17/1 | MILLIAM | え ろご | 3 3 X | |
| CITY-ST-ZIP | GOOPEN CITTLE 35320 | DELETE | 2.4 CITY+ST-ZIP 3.1 TITLE | 100 | 44 V.4 | | ☐ Change | ☐ Addition |
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| | | _ 5-1-7-1 | 6.2 NAME | | | | | |
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| STREET ADDRESS | l | | 0.0 O INCL I ADDINEDO | 1 | | | | |

6.4 CITY-ST-ZIP 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 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 advices, with all other like empowered.

SIGNATURE: