Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90297 015 ***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 # P98000041848

1, Corporation Name

HIS AND HERS LAWN SERVICE, INC

THO AIRD	TIERO EAVIT GETTIGE, INC	•					
Principal Place of Business Mailing Address						\$ 100% (00%) ICE (000% 10%) \$ 000% 000% 000% 000% 1000% 1000% 1000% 1000%	
98 SPARROW LANE 98 SPARROW LANE					-		
ROYAL PALM BCH FL 33411 ROYAL PALM BCH FL 33411							
HOTHE FREM BOTT FE SOUTH						DO NOT WRITE IN THIS SPACE	
					ſ	3. Date Incorporated or Qualifed	
						05/06/1998	
2. Principal Place of Business 2a. Mailing Address						4. R Number & Applied For	
21 26						65-0831679 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					_ \$8.75 Additional		
22 27					- 1	5. Certificate of Status Desired Fee Required	
City & State	City & State				- 6. Election Campaign Financing - \$5.00 May Be		
23	المستحدد علاها الما	28	•		_	Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country			8. This corporation owes the current year Intangible	
24	25	29 30	ה (Personal Property Tax. ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
3. Name and reduced of Call State Agents				Name			
SWEATT, MICHAEL S							
98 SPARROW LANE			82	Street A	ddres	ss (P.O. Box Number is Not Acceptable)	
ROYAL PALM BCH FL 33411			83	 			
			100			·	
·			84	City		FL 85 Zip Code	
				L			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 a	n familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes			•	
SIGNATURE							
	Signature, typed or printed name of registered agent			nt signature req	quired w	when reinstating) DATE	
12.	OFFICERS AND		13.	—-		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
TITLE	PD	☐ DELETE	1.1 TITLE				
NAME	SWEATT, MICHAEL S		1.2 NAME				
STREET ADDRESS	98 SPARROW LANE	i	1.3 STREE	TADDRESS			
CITY-ST-ZIP	ROYAL PALM BCH FL 33411		1.4 CITY-S	T-ZIP			
TITLE	VD	☐ DELETE	2.1 TITLE			Change Addition	
NAME	SWEATT, MARY E		2.2 NAME	\ \ \			
STREET ADDRESS	98 SPARROW LANE		2.3 STREE	T ADDRESS		•	
CITY-ST-ZIP	ROYAL PALM BCH FL 33411		2. 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE	$\overline{}$		Change Addition	
NAME	and the second of the second of the second of	رهد د دمختود این این ۱۹۰۰ د این این این	3.2 NAME	1			
STREET ADDRESS			33 STREE	TADDRESS			
			3.4. CITY-5				
CITY-ST-ZIP		□ DELETE	4.1 TITLE	71-4JF		☐ Change ☐ Addition	
		_ 522-12	4. 2 NAME]		, <u> </u>	
NAME							
STREET ADDRESS	•			T ADDRESS			
CITY-ST-ZIP		∏ per ere	4.4 CITY - S	T-ZIP		☐ Change ☐ Addition	
TMLE		☐ DELETE	5.1 TITLE				
NAME .	•		5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			

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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

EWUIRED

☐ DELETE

☐ Change

■ Addition