PROFIT CORPORATION ANNUAL REPORT

1999



Mailing Address

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000053679

TREE GARDEN RENTALS CO.

Principal Place of Business

7441 NORTHWEST 4TH STREET PLANTATION FL 33317-2204			7441 NORTHWEST 4TH STREET PLANTATION FL 33317-2204				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
							06/16/1998	
2. Principal Place of Business 2a. Mailing Address							4. FEI Number Applied For	
21			26				65-0868364 Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired See Required	
22			27				1001/040000	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be	
23			Zip Country				Trust I dita Comment	
Zip	Country	├-¬ ⁻ '			nuy		8. This corporation owes the current year Intangible Personal Property Tax.	
24	25 29 30			30	10. Name and Address of New Registered Agent			
Name and Address of Current Registered Agent					81	Name		
MCLEARY, TERENCE J					82		The state of the s	
7441 NORTHWEST 4TH STREET						Street	et Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33317-2204					83			
	,						85 Zip Code	
j					84	City	FL	
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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered agen				Ager	s anderson a	re required when reinstating) DATE	
12.	OFFICERS AN	D DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PST Change X Addition	
TIFLE			☐ DELETE	1.1 11				
NAME				12N			M A Harano ss] 7441 Northwest 4th Street	
STREET ADDRESS						TADORESS	Plantation, FL 33317	
CITY-ST-ZIP			☐ DELETE	1.4 C		1-21	Change Addition	
TITLE) bettere			22 NAME			j	
NAME .			L			ADDRESS	223	
STREET ADDRESS	-					T-21P		
TITLE DELETE			☐ DELETE	-	3.1 TITLE		☐ Change ☐ Addition	
NAME	•			3.2 N	WE			
STREET ADDRESS				3.3 5	REE	TADDRESS	55	
CITY-ST-ZIP	 					ST-212		
TITLE				4.1 TI	4.1 TITLE		Change Addition	
NAME		.		4.2N	AME		1	
STREET ADDRESS	TADORESS		4.35	4.3 STREET ADDRESS		58		
CITY-ST-ZIP				440	TY-S	T-ZIP		
TITLE			☐ DELETE	5.1 ग			☐ Change ☐ Addition	
NAME				5.2 N				
STREET ADDRESS	}					T ADDRESS	SS	
CITY-ST-ZIP			<u> </u>	5.4 C		T-ZP	☐ Change ☐ Add∜on	
TITLE			☐ DELETE	61 II			□ Avanda □ victorii	

STREET ADDRESS

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.

8.3 STREET ADDRESS

6.4 CITY-ST-20P

May 07, 1999 8:00 am Secretary of State

05-07-1999 90033 042 ***150.00

CR2E034 (11/98)