## 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

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90029 021 \*\*\*150.00

## DOCUMENT # P98000077723

HURST LANDSCAPE & MAINTENANCE, INC.

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5600 SW 164TH		5600	SW 164TH TERR.	•							
FT. LAUDERDAL			LAUDERDALE FL 33331	i			}				. 1
							_	DO NOT WRITE	IN THIS S	SPACE	
							3	3. Date Incorporated or Qualifed			}
	•		· :					09/02/1998	•		
2. Principal Pl	lace of Business	2a.	Mailing Address				4	4. FEI Number		_ <del>                                    </del>	plied For
21		26						65-0860077			t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				۱,	5. Certificate of Status Desired		\$8.75	
22	•	27							<del></del>		equired
City & State	e		City & State				(	6. Election Campaign Financing		\$5.00	
23		28						Trust Fund Contribution		Added	to Fees
Zip	Country		Zip	Cou	intry		(	<ol><li>This corporation owes the current</li></ol>			<b></b>
24	25	29		30				Personal Property Tax.		☐ Yes	MNo
	9. Name and Address of Currer	nt Regist	ered Agent				1	0. Name and Address of New Reg	gistered A	gent	
					81	Name			•		
	ST, JOHN ANDREW				82	Street A	Address	(P.O: Box Number is Not Acceptable	e)		
	) SW 164TH TERR.					000007	1001000		• •		
FT. L	LAUDERDALE FL 33331				83			7,			1
						•		<u> </u>		as Zin	Code
					84	City			FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.050	02 and 60	7.1508. Florida Statut	es, the a	bove	-named c	corporat	ion submits this statement for the pu	rpose of c	hanging its	registered
office or re	registered agent, or both, in the State	of Florida	a. Such change was a	uthonzed	ועסוכ	ine corpoi	oration's	board of directors. I hereby accept t	he appoint	tment as re	gistered
agent. l ai	m familiar with, and accept the obliga	ations of,	Section 607.0505, Flo	inda Siai	uies.						Į
SIGNATURE											I
	Clangture bond as printed name of majetored and	ont and title if	applicable (NOTE	Registered	1 Agent	signature rei	equired whe	n reinstating)	DATE		
	Signature, typed or printed name of registered age		.,,		1 Agent	t signature re	equired whe	n reinstating) ADDITIONS/CHANGES TO OFFIC		DIRECTO	DRS IN 12
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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.

SIGNATURE: