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 # P98000095123

. Corporation Name

PAGE A. LAWN, INC.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90016 039 ***158.75



	·	<u> </u>						
Principal Place	e of Business	Mailing Address				1		
1200 SW 78TH COURT 1200 SW 78TH COURT								
MIAMI FL 33144	4	MIAMI FL 33144				DO NOT WRITE IN THIS SPACE		
	• • • • • • • • • • • • • • • • • • • •					3. Date Incorporated or Qualifed		
	•					11/10/1998		-
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0875399		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #,			, etc.			5. Certificate of Status Desired		Additional
22	and the second of the second	27	· _ •			o. Certificate of Status Desired	Fee F	Required
City & State	e	City & State				6. Election Campaign Financing		🕽 May Be
23	· ·	28				Trust Fund Contribution		d to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Int		
24	25		30			Personal Property Tax. Yes No 10. Name and Address of New Registered Agent		
	9. Name and Address of Current	Registered Agent		81	Name	iv. Name and Address of New Registered	-April	
VEG	A, JOAQUIN							
1200 SW 78TH COURT				82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
MIAMI FL 33144				83			_	
IMINAI	III 1 E 00 1 TT			53				
		•		84	City	FL	85 Zip	p Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statute	s, the al	bove	-named corp	oration submits this statement for the purpose of	changing i	its registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was at	nnonzed	DV I	the corporatio	on's board of directors. I hereby accept the appoi	ntment as	registered
SIGNATURE				_				
	Signature, typed or printed name of registered agent	······································		Agent	t signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	TORS IN 12
12.	OFFICERS AND	DIRECTORS DELETE	13.		-	ADDITIONS/CHANGES TO OFFICERS AN	Change	
TITLE	D ·	L'1 DELE 16	1.1 TIT					
NAME	VEGA, JOAQUIN	•	1.2 NA		ADDDESS			
STREET ADDRESS	1200 SW 78TH COURT		F		ADDRESS			
CITY-ST-ZIP	MIAMI FL 33144	DELETE	1.4 CI 2.1 TI		1-212	<u> </u>	☐ Change	e
TITLE	D VECA CABA	C DETELE			`			
NAME	VEGA, SARA		2.2 NA		ADDRESS			
STREET ADDRESS	1200 SW 78TH COURT			_	ADDRESS	والموارية الأراد المتعول مواريد	. ,	
CITY-ST-ZiP	MIAMI FL 33144	☐ DELETE	2.4 C 3.1 TT		··· ZP		Chang	e Addition
TITLE			3.2 NA		'		_ •	_
NAME					ADDRESS			
STREET ADDRESS	<u>'</u>		3.4. C					
CITY-ST-ZIP TITLE		☐ DELETÉ	4.1 TC		1-2F		Chang	e 🗌 Addition
	, , ,	_ >====	4. 2 N				<i>-,</i> •	_
NAME CTREET ADDRESS					ADDRESS .			
STREET ADDRESS	• •		4.4 CF					
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CI 5.1 TI	~	,-21		☐ Chang	e Addition
NAME			5.2 N				_	
STREET ADDRESS	, -		i i		ADDRESS			
CITY-ST-ZIP	•		5.4 CI					
TITLE		☐ DELETE	6.1 77				☐ Chang	e 🔲 Addition
NAME	1		6.2 N/	AME				
STREET ADDRESS	Art. This				ADDRESS			
CITY OF THE	Co. Control		6.4 CF					

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 true ee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

SIGNATURE: X

HAGIER OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/99 30/26227/