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 # P98000104606

1. Corporation Name

FLORIDA LANDSCAPING LIGHTING, INC.

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90076 031 ***150.00



Principal Place of Business Mailing Address						i i 18811881 ire raran i eur sanu earri	34)51 (12() 3 2(118 BIIS 1861
5725 BENT OAK DRIVE 5725 BENT OAK DRI									
sarasota fl 3	14232	SARASOTA FL 34232			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed		J	
						12/15/1998			1
2. Principal P	lace of Business	2a. Mailing Address				4, FEI Number		Apr	lied For
21 572	REBOUT CAK DR.	26 5728 BBM	-a	W)	Dre	65-0887722		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	I
22		27				5. Certificate of Status Besides	<u> </u>	Fee Red	quired
City & Stat		City & State	رمسه			6. Election Campaign Financing	П	\$5.00 1	•
23 MARAS		28 SARAGOTA, 1				Trust Fund Contribution		Added to	Fees
Zip 24 342	Country 25	29 34232 3	Coun 30	try		This corporation owes the curre Personal Property Tax.	nt year Inta		□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	agistered /	gent	
				31 Na	me				
KOPLIN, SETH				32 Str	eet Addre	ess (P.O. Box Number is Not Acceptable)			
5725 BENT OAK DRIVE								<u> </u>	
SAHA	SOTA FL 34232			33					
			ļ,	34 Cit	у			85 Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the						S. Aba	FL	hanaisa ita i	rogistored
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	! and 607.1508, Florida Statutes of Florida. Such change was auf	s, the ab thorized	ove-nar by the c	ned corpo corporation	pration submits this statement for the p m's board of directors. I hereby accept	the appoin	itment as reg	istered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	da Statut	es.	•				ļ
SIGNATURE		AVOTE. I	2	ant sinns	tura saguirad	when reinstating)	DATE		— \
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	den r siðus	itara radoliad	ADDITIONS/CHANGES TO OFF		D DIRECTO	RS IN 12
TITLE	n ·	[] DELETE	1.1 TITL	E			•	Change	☐ Addition
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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 address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: