FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1998				Secretary of State DIVISION OF CORPORATIONS					Secretary of State									
D	OCUM Corporation N	ENT #	S37644		(9)													
	ENTS TRI	EE & LAND	SCAPING SER	VICES, INC.														
Prir	cipal Place of	Business		Mailing Add	rėss					┨	()()()		10010 B HHF 1	IANEL GIRE E		I OLDII GEBILI		
763 HIBISCUS DRIVE 763 HIBISCUS DRIVE ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411							2411											
m	JIAL TALM DE	AUN FE 33411		NOTAL PAL	M DEMON F	L 33411							OO NOT W		V THIS	SPACE		
										3		corporate 8/1991	d or Quali	ified				
2. (Principal Place	of Business		2a. Mailing A	Address					4	. FEI Nu						 Арр	lied For
21	Dulle And H			26							65-	025482	<u> </u>					Applicable
22	Suite, Apt. #, e	HC.		Suite, Ap	ot. #, etc.					5	. Certific	ate of Sta	tus Desire	id [,	_	dditional uired
	City & State			City & St	ato					6	. Election	n Campai	gn Financi	ing		\$5.0	10 N	łay Be
23	Zip	 	Country	Zip		T Co	untry	,		+-		und Contr			Ц			Fees
24	LIP	25 29 30								8		•	owes or na y Tax due			rrent year Yes	Intar	-
		Name and	Address of Current		ont					10	. Name	and Addr	ess of Ne	w Regis	stered	Agent		
		ITT, DIANA L					81	Na	me									
763 HIBISCUS DRIVE ROYAL PALM BEACH FL 33411							82	Str	eel Addre	ess (l	P.O. Box	Number	s Not Acc	eptable)			
	no in	E I MEIN DEM	OII 1 E 00411				83	ļ										
]							84	Cit	y							85 Zi	p Co	ode
11	Pursuant to th	ne provisions o	Sections 607 0502	and 607 1508 F	lorida Stati	iles the a	hove	e-nar	ned corn	oratio	on submi	ts this stat	ement for	the nur	DOSO D	Changing	ı its	registered
'''	office or regis	stered agent, o	Sections 607.0502 r both, in the State of d accept the obligation	Florida. Such o	hange was 607.0505, F	authorize lorida Sta	d by	the	corporali	ion's	board of	directors.	I hereby a	accept t	the app	ointment	as re	gistered
SIG	NATURE	_																
12.	Sign	ature, typed or printi	OFFICERS AND		(NC	TE Hegistere	d Age	ent Biga	ature require				IGES TO C	OFFICE	DATE RS AND	DIRECT(ORS	IN 12
TITLE		VD			1.1 7(TLE								Change		Addition		
NAME	1 .	MERRITT, MI				1.2 N												
1	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	763 HIBISCU Royal Palm	I BEACH FL 3341'	1			TREET ITY-S'	ADDR	ESS									
TITLE		PST	· Ourion (C do ()		DELETE	2.1 Ti		1-215								☐ Change	 e	Addition
NAME		MERRITT, DI				2.2 N	AME											
1		7 6 3 HIBSCUS Royal Palm						ADDR	SS						•			
TITLE		HOTAL FALM	BEACHTE		DELETE	2 4 C	_	ST-ZIP								☐ Change	 e	Addition
NAMI	ł ·					3.2 N												
STRE	et address					3.3 S	TREE1	ADDRI	SS									
CITY-	ST-ZIP				DELETE	3.4. C		31 - ZIP								Change		Addition
NAME				_	3 0022.72	4.2 N												
ŞTREI	et address					4.3 \$1	TREE1	ADDR	SS									
$\overline{}$	ST-ZIP				DELETE		[TY-\$]	T-ZIP								Change		Addition
NAME				L.) DECE IE	5.1 TI 5.2 N										Change	ď	Monitori
l	ET ADDRESS							ADDRI	ss									
CITY-	ST-ZIP		14		.	5.4 0	ITY-S	T - ZIP										,
TITLE					DELETE	6.1 TI										☐ Change	e	Addition
NAME						6.2 N		# DDP										
}	T ADDRESS ST-ZIP					1		ADDRI 1-ZIP	.03									

14. I hereby certify that the information supplied with this filling 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 changes, or on an attachment with an address.

FILED

Jan 28 1998 8:00am