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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S85103

(7)

**BUZZY PORTER'S LANDSCAPE MAINTENANCE, INC.** 

Principal Place of Business Mailing Address 1332 PHILLIPS STREET 1332 PHILLIPS STREET DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/30/1991 2. Principal Place of Business Mailing Address 2a. 4. FEI Number Applied For 59-3087666 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Žίρ This corporation owes or has paid the current year Intangible Yes 24 25 □ No 30 Personal Property Tax due June 30. 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RHYNARD, M A Name 515 S RIDGEWOOD AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32114 83 84 City Zip Code 11. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change \_\_\_ Addition RAMCHAND RAMROOP NAME 1332 Aillips Street 349 FIRST AVE STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE OnitiphA NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ■ Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-S1-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE Addition 5 1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 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 chapter 607, and that my name address.

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**FILED** 

Mar 20 1998 8:00am

Secretary of State