Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90164 015 ***150.00

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 # S85103

STREET ADDRESS

CITY-ST-ZIP

BUZZY PORTER'S LANDSCAPE MAINTENANCE, INC.

Principal P ace of Business Mailing Address									
1332 PHILLIPS			1332 PHILLIPS STREET						
DAYTONA BEAC	UH FL 32114	US	DAYTONA BEACH FL 32114			DO NOT WRITE IN THIS SPACE			
00		30				3. Date I reorporated or 09/30/1991	Qualifed	_	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		A	putied For
21		26				59-3087666		N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status D	esired		Additional
22		27						Fee R	lequired
City & Stat	e	City & State				6. Election Campaign Fi	inancing		lvlay Be
23		28				Trust Fund Contributi	on	Added	to Fees
Zip	Courtry	Zip Country				8. This corporation owe:			7
24	25		30			Personal Property Ta		Yes	No
	9. Name and Address of Curre	nt Registered Agent	-	4 -1-		0. Name and Address	of New Registers	<u>a</u> Agent	-
A NA	NADD M A		8	1 Nan	ne				
	NARD, M A		8	2 Stre	et Address	(P.O. Bo) Number is No	t Acceptable)		
	S RIDGEWOOD AVENUE		L	<u> </u>					
DAY	TONA BEACH FL 32114		8	3					
			8.	4 City				. 85 Zip	Code
				1 0,			F		
SIGNATUFE	Signature, typed or printed name of registered age	ent and title if applicable. (NOT E. N.(1) DIRECTORS	Registered Ag	ent signati	ture required whe	n reinstating) ADDITIONS/CHANGE	DATE S TO OFFICERS	AND DIRECT	ORS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	RAMCHAND RAMROOP		1 2 NAME						į
STREET ADDRESS	1332 PHILLIPS ST		1.3 STRE	ET ADDRE	ESS				,
CITY-ST-ZIP	DAYTONA BEACH FL 32114		1.4 CITY-	ST-ZIP					
TITLE	☐ DELETE		2.1 TITLE	2.1 TITLE				☐ Change	Addition
NAME			2.2 NAME						,
STREET ADDRESS			2.3 STRE	ET ADDRE	ēSS				1
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE					Change	☐ Addition
NAME			3.2 NAME						
STREET ADDRESS	;		33STRE	ET ADDRE	ESS				\
CITY-ST-ZIP			3.4. CITY	-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME			4 2 NAM	Ε					
STREET ADDRESS	;		4.3 STRE	ET ADDRE	ESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME		•	5.2 NAME						
STREET ADDRE 'S			5.3 STRE	ET ADDRE	ESS				į
CITY-ST-ZIP			54 CITY-						
TITLE	_	☐ DELETE	6 1 TITLE					Change	Addition
NAME			. 6.2 NAME	Ē					Ì

14. 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 recuired 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 AND TYPED OR I RINTED NAME OF SIGNING OFFICE : OR DIRECTOR SIGNATURE X

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP