

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

FILED  
Feb 27, 1999 8:00 am  
Secretary of State

02-27-1999 90074 038 \*\*\*150.00

DOCUMENT # S94741

1. Corporation Name

A. DEBARTOLO LANDSCAPING, INC.

Principal Place of Business  
1381 PINE VALLEY DRIVE WEST  
WEST PALM BEACH FL 33414

Mailing Address  
1381 PINE VALLEY DRIVE WEST  
WEST PALM BEACH FL 33414

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1991

4. FEI Number

65-0293483

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 15510 ROLLING MEADOW CIR

Suite, Apt. #, etc.

22

City & State

23 WELLINGTON FL

Zip

24 33414

Country

25 USA

2a. Mailing Address

26 15510 ROLLING MEADOW CIR

Suite, Apt. #, etc.

27

City & State

28 WELLINGTON FL

Zip

29 33414

Country

30 USA

9. Name and Address of Current Registered Agent

DEBARTOLO, ANTOINETTA  
1381 PINE VALLEY DRIVE WEST  
WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent

81 Name IMMACOLATA ZOTTOLI  
82 Street Address (P.O. Box Number is Not Acceptable)  
15510 ROLLING MEADOW CIR  
83  
84 City WELLINGTON FL 85 Zip Code 33414

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 IMMACOLATA ZOTTOLI

(NOTE: Registered Agent signature required when reinstating)

DATE

1/29/99

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE  
NAME DEBARTOLO, ANTOINETTA  
STREET ADDRESS 1381 PINE VALLEY DRIVE W  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE D PIS ☐ DELETE  
NAME IMMACOLATA ZOTTOLI  
STREET ADDRESS 15510 ROLLING MEADOW CIR  
CITY-ST-ZIP WELLINGTON FL 33414

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/29/99 (561) 793-1457

CR2E034 (11/98)

0331675