

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90451 045 ***150.00

DOCUMENT # V13421

1. Entity Name
HARTH LANDSCAPING, INC.



Principal Place of Business
113 N. FEDERAL HWY
DANIA, FL 33004

Mailing Address
113 N. FEDERAL HWY
DANIA, FL 33004

14016756



04302004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0309209

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ADAMS, GERALD J II
C/O FAST TAX
113 N FEDERAL HWY
DANIA, FL 33004

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HARTH, GEORGE
STREET ADDRESS 754 SW 157 TERRACE
CITY-ST-ZIP SUNRISE, FL 33326

TITLE T
NAME HARTH, DEBBIE
STREET ADDRESS 754 SW 157TH TERR
CITY-ST-ZIP SUNRISE, FL

TITLE D
NAME ADAMS, GERALD
STREET ADDRESS 113 N FERERAL HWY
CITY-ST-ZIP DANIA, FL 33004

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] **GERALD ADAMS - REGISTERED AGENT** 4/30/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #