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PROFIT CORPORATION ANNUAL REPORT

1997

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V20297

(0)

GARRETT LAWN & LANDSCAPING, INC.

Principal Place of Business Mailing Address 11620 SW 123 AVE 11620 SW 123 AVE MIAMI FL 33186-5045 MIAMI FL 33186 HS 3. Date Incorporated or Qualified 3a. Date of Last Report 03/09/1992 04/03/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0323488 Not Applicable 26 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be **Trust Fund Contribution** Added to Fees 28 23 Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032 Yes 🔲 No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GARRETT, MARK S. 11754 SW 123RD AVENUE 82 Box Number is Not Acceptable) MIAMI FL 33186 83 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13, (96/6)Change DELETE Addition 1.1 TITLE THILE GARRETT, MARK S. 12 NAME NAME 11754 SW 123RD AVENUE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** 1.4 CITY-ST-ZIP CITY-S1-ZIP Change Addition DELETE TITLE 2.1 TITLE GARRETT, LINDA C. 2.2 NAME NAME 11754 SW 123RD AVENUE 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition DELETE Change TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5,2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 Florida Statutes.