2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State
02-25-2004 90013 049 ***150.00

DOCUMENT # V20297

1. Entity Name
GARRETT LAWN & LANDSCAPING, INC.

Principal Place of Business	Mailing Address
~~11620 SW 123 AVE~~ ~~MIAMI, FL 33186~~ ~~05~~ 10510 SW 135TH CT. MIAMI, FL. 33186	~~11620 SW 123 AVE~~ ~~MIAMI, FL 33186~~ ~~05~~ 10510 SW 135TH CT. MIAMI, FL. 33186

DO NOT WRITE IN THIS SPACE

01282004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0323468 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GARRETT, MARK S.
~~11620 SW 123RD AVE~~
~~MIAMI, FL 33186~~
10510 SW 135TH CT.
MIAMI, FL. 33186

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	D
NAME	GARRETT, MARK S.
STREET ADDRESS	~~11620 SW 123 AVE~~ 10510 SW 135TH CT
CITY-ST-ZIP	~~MIAMI, FL 33186~~ MIAMI, FL. 33186
TITLE	D
NAME	GARRETT, LINDA C.
STREET ADDRESS	~~11620 SW 123 AVE~~ 10510 SW 135TH CT.
CITY-ST-ZIP	~~MIAMI, FL 33186~~ MIAMI, FL. 33186
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Mark Garrett 2/19/04 305-752-2840
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #