

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V47025** (4)
1. Corporation Name
THE TROPICS LANDSCAPING, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5032 SW 121ST AVE COOPER CITY FL 33330		Mailing Address 5032 SW 121ST AVE COOPER CITY FL 33330	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 06/30/1992		4. FEI Number 65-0342162	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. Name and Address of Current Registered Agent MACKEY, MARIBEL 5032 SW 121ST AVE COOPER CITY FL 33330	
9. Name and Address of New Registered Agent 81 Name Maribel Foong 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		10. 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 Maribel Mackey Foong Maribel Mackey Foong 4-21-98 Signature (Typed or printed name of registered agent and title, if applicable) (Typed or printed name of registered agent and title, if applicable) DATE	
11. OFFICERS AND DIRECTORS 12. TITLE D <input type="checkbox"/> DELETE NAME MACKEY, MARIBEL STREET ADDRESS 5032 SW 121ST AVE CITY-ST-ZIP COOPER CITY FL 33330		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME Foong, Maribel 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
14. TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		15. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.1 NAME 2.2 STREET ADDRESS 2.3 CITY-ST-ZIP	
16. TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		17. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.1 NAME 3.2 STREET ADDRESS 3.3 CITY-ST-ZIP	
18. TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		19. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.1 NAME 4.2 STREET ADDRESS 4.3 CITY-ST-ZIP	
20. TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		21. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.1 NAME 5.2 STREET ADDRESS 5.3 CITY-ST-ZIP	
22. TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		23. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.1 NAME 6.2 STREET ADDRESS 6.3 CITY-ST-ZIP	

CP2E034 (10/97)