


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

FILED

May 13 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 # V72994 (9) 1. Corporation Name NEW LIFE TREE SERVICE & LANDSCAPING, INC.					
Principal Place of Business 122 ALLEN ROAD- HOLLYWOOD FL 33023		Mailing Address 122 ALLEN ROAD- HOLLYWOOD FL 33023			
2. Principal Place of Business 21 11039 HELENA DRIVE Suite, Apt. #, etc.		2a. Mailing Address 26 11039 HELENA DRIVE Suite, Apt. #, etc.		3. Date Incorporated or Qualified 10/21/1992	
22 HO City & State 23 FL 24 33026 Zip		27 HO City & State 28 FL 29 33026 Zip		4. FEI Number 65-0364907 Applied For Not Applicable	
25 FL City & State 26 33026 Zip		27 HO City & State 28 FL 29 33026 Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
30 FL City & State 31 33026 Zip		32 HO City & State 33 FL 34 33026 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
35 FL City & State 36 33026 Zip		37 HO City & State 38 FL 39 33026 Zip		8. 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	
9. Name and Address of Current Registered Agent MERCHANT, JESSIE 122 ALLEN ROAD HOLLYWOOD FL 33023			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		
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) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	PD	<input type="checkbox"/> DELETE			
NAME	MERCHANT, JESSIE				
STREET ADDRESS	122 ALLEN ROAD				
CITY - ST - ZIP	HOLLYWOOD FL 33023				
TITLE	STD	<input type="checkbox"/> DELETE			
NAME	MERCHANT, IVEY				
STREET ADDRESS	12208 WASHINGTON ST. BLDG. 1				
CITY - ST - ZIP	PEMBROKE PINES FL 33025				
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
1.2 NAME					
1.3 STREET ADDRESS	11039 HELENA DRIVE				
1.4 CITY - ST - ZIP	HOLLYWOOD, FL 33026				
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY - ST - ZIP					
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY - ST - ZIP					
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY - ST - ZIP					
6.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY - ST - ZIP					



DO NOT WRITE IN THIS SPACE

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.