

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017423

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: ALL AMERICAN LANDSCAPING OF SOUTH FLORIDA, L.C.

**Current Principal Place of Business:**

4778 NW 107TH AVE  
SUITE 205  
MIAMI, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 191722  
MIAMI BEACH, FL 33119

**New Mailing Address:**

FEI Number: 65-1146058      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEWART AGENT SERVICE  
2199 PONCE DR LEON BLVD.  
SUITE 301  
CAROL SPRINGS, FL 33134 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: TRAVERSO, TOMAS P  
Address: PO BOX 1917 22  
City-St-Zip: MIAMI BEACH, FL 33119

Title: VPS ( ) Delete  
Name: TRAVERSO, VIVIANA V  
Address: PO BOX 191722  
City-St-Zip: MIAMI BEACH, FL 33119

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VIVIANA TRAVERSO

VPS

04/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date