

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017423

FILED
Apr 30, 2007
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:

4778 NW 107TH AVE
SUITE 206
MIAMI, FL 33178

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 (X)

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/MANAGERS:

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 exemption stated in Chapter 119, 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: TOMASTRAVERSO

MGRM

04/30/2007

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