


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

47. **FILED**  
**Jun 02, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90321 001 \*\*\*138.75

<b>DOCUMENT # L07000065175</b>							
1. Entry Name <b>ABOVE ALL LANDSCAPE MAINTENANCE LLC</b>							
Principal Place of Business 5150 NW 17TH ST MARGATE, FL 33063			Mailing Address 5150 NW 17TH ST MARGATE, FL 33063				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				
City & State			City & State				
Zip	Country	Zip	Country	4. FEI Number <b>APPLIED FOR</b>			
				Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
<b>VALLETTA, DENISE</b> 2876 SW 14TH CRT DEERFIELD BEACH, FL 33442			Name -				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>							
<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>			Make check payable to Florida Department of State				
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES				
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VALLETTA, DENISE		NAME				
STREET ADDRESS	2876 SW 14TH CRT		STREET ADDRESS				
CITY - ST - ZIP	DEERFIELD BCH, FL 33442		CITY - ST - ZIP				
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VALLETTA, DAVID		NAME				
STREET ADDRESS	2876 SW 14TH CRT		STREET ADDRESS				
CITY - ST - ZIP	DEERFIELD BCH, FL 33442		CITY - ST - ZIP				
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY - ST - ZIP			CITY - ST - ZIP				
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY - ST - ZIP			CITY - ST - ZIP				
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY - ST - ZIP			CITY - ST - ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 808, Florida Statutes.							
SIGNATURE: <i>Denise Valletta</i>			Date: <i>4/18/08</i> Phone #: <i>9549697744</i>				
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>							

30008330



03132008 Chg-LLC CR2E083 (12/06)