2008 FOR PROFIT CORPORATION

FILED Jan 24, 2008 08:00 A Secretary of State ANNUAL REPORT **DOCUMENT # P01000077101** 1. Entity Name GERMAN LAWN SERVICE INC Principal Place of Business Mailing Address 9531 SW 165 STREET 9531 SW 165 STREET MIAMI, FL 33157 MIAMI, FL 33157 01172008 CR2E034 (11/05) No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1129275 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALFARO, GERMAN D DO NOT WRITE 9531 SW 165 STREET MIAMI, FL 33157 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE -NAME ALFARO, GERMAN D STREET ADDRESS 9531 SW 165 STREET CITY-ST-ZIP MIAMI, FL 33157 TITLE U00000795538 NAME 01/28/08-80053-001 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET AC CITY-ST-Z TITLE NAME STREET ADDRES

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP TIT) F NAME STREET ADDRESS CITY-ST-ZIP