2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057888

City-St-Zip:

WINTER GARDEN, FL 34787

FILED May 01, 2006 Secretary of State

					,	
Entity Nan	ne: TROPICU	JTS LANDSCAPING INC.				
Current Pi	incipal Place	of Business:	New Princ	New Principal Place of Business:		
12642 159TH CT JUPITER, FL 33478				12642 159TH CT N. JUPITER, FL 33478		
Current M	ailing Addres	ss:	New Maili	New Mailing Address:		
13750 W. COLONIAL DRIVE SUITE 350-120 WINTER GARDEN, FL 34787				12642 159TH CT. N. JUPITER, FL 33478		
FEI Number:	56-2358295	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SUITE 350	COLONIAL DR		323 DRAKI	TAYLOR, EVELYN L 323 DRAKE ELM DRIVE KISSIMMEE, FL 34743 US		
The above in the State		submits this statement for the po	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE: EVELYN	TAYLOR		05/01/2006		
	Electror	nic Signature of Registered Age	nt		Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	receive the prior notic	e.		
OFFICERS	AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () PEREZ, JUAN 1 12642 159TH C JUPITER, FL 3	CT N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () GIRON, GERSO 12642 159TH O JUPITER, FL 3	CT N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T () TAYLOR, EVEL 13750 W COLO		Title: Name: Address:	T (X TAYLOR, EVE 323 DRAKE E		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

KISSIMMEE, FL 34743

SIGNATURE: EVELYN TAYLOR TRES 05/01/2006