2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 18, 2008 8:00 am
Secretary of State

02-28-2008 90014 025 ***150.00

DOCUMENT # P05000021526

1. Entity Name

T.J. IRRIGATION, INC.

Principal Place of Business	Mailing Address
~~3397 NW 33RD AVE~~ ~~OKEECHOBEE FL 34972~~ ~~US~~	~~3397 NW 33RD AVE~~ ~~OKEECHOBEE FL 34972~~ US

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
3670 NW 28th AVE	3670 NW 28th AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Okeechobee FL — City & State	Okeechobee FL. — City & State
Zip 34972 — Country	Zip 34972 — Country

4. FEI Number 65-0991571 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JAIMES, TEOFILO
~~3397 NW 33RD AVE~~
~~OKEECHOBEE FL 34972~~

7. Name and Address of New Registered Agent

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 Teofilo Jaimes 3-13-08

Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating. DATE 3-13-08

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

Teofilo Jaimes

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JAIMES, TEOFILO 3670 NW 28th AVE ~~3397 NW 33RD AVE~~ Okeechobee FL 34972 ~~OKEECHOBEE FL 34972~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President TEOFilo Jaimes 34972 3670 NW 28 AVE OKEECHOBEE Fl ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Jaimes Conrrada ~~JAIMES, CONRRADA~~ 3670 NW 28th AVE ~~3397 NW 33RD AVE~~ ~~OKEECHOBEE FL 34972~~ Okeechobee FL 34972 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Teofilo Jaimes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #