2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000058346

Entity Name: ALL-OUT LAWNCARE, INC.

3948 3RD STREET SOUTH #350

JACKSONVILLE BEACH, FL 32250 US

Address:

City-St-Zip:

FILED May 24, 2007 Secretary of State

	ALL OOT L		_, II ().				
Current Principal Place of Business:				New Principal Plac	New Principal Place of Business:		
3948 3RD : SUITE #35	STREET SOUT	'H					
	VILLE BEACH,	FL 32250	US				
Current Mailing Address:				New Mailing Addre	New Mailing Address:		
SUITE #35			LIO.				
	VILLE BEACH,		US				
FEI Number:	20-4785920	FEI Number	Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address	Name and Address of New Registered Agent:		
3948 3RD 3 SUITE #35 JACKSON	VILLE BEACH, named entity su of Florida.	FL 32250 l		ourpose of changing its registe	red office or registered agent, or both,		
SIGNATUR		Signature	of Registered Age	ont on the second of the secon	 Date		
		(2)(b), F.S., th	e corporation did no	of treceive the prior notice.	Buto		
OFFICERS AND DIRECTORS:				ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () E BECHEM, WALTI 3948 3RD STREI JACKSONVILLE	ET SOUTH #3		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD (X) I BECHEM, WALTI 3948 3RD STREI JACKSONVILLE	ET SOUTH #3		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	TD (X) [BECHEM, HARRI	Delete IETT J		Title: Name:	() Change () Addition		

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 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.

Address:

City-St-Zip:

SIGNATURE: WALTER H. BECHEM,III PD 05/24/2007