2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2008
Secretary of State

DOCUMENT# P06000156683

Entity Name: ROMEO'S NURSERY, INC.

Current Principal Place of Business:

18000 S.W. 50TH STREET
SOUTHWEST RANCHES, FL 33331

New Principal Place of Business:

18000 S.W. 50TH STREET
SOUTHWEST RANCHES, FL 33331 US

Current Mailing Address:

18000 S.W. 50TH STREET
SOUTHWEST RANCHES, FL 33331

New Mailing Address:

18000 S.W. 50TH STREET
SOUTHWEST RANCHES, FL 33331 US

FEI Number: 20-8250177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROMERO, MAXIM H
18000 S.W. 50TH STREET
SOUTHWEST RANCHES, FL 33331 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROMERO, MAXIM H .
Address: 18000 S.W. 50TH STREET
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: VP ( ) Delete
Name: ROMERO, LAURO T
Address: 18000 S.W. 50TH STREET
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: SEC ( ) Delete
Name: COBO, SYLVIA R .
Address: 12 CASTLE HARBOR ISLE
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ROMERO, MAXIM H .
Address: 18000 S.W. 50TH STREET
City-St-Zip: SOUTHWEST RANCHES, FL 33331 US

Title: VP (X) Change ( ) Addition
Name: ROMERO, LAURO T
Address: 18000 S.W. 50TH STREET
City-St-Zip: SOUTHWEST RANCHES, FL 33331 US

Title: SEC (X) Change ( ) Addition
Name: COBO, SYLVIA R .
Address: 12 CASTLE HARBOR ISLE
City-St-Zip: FORT LAUDERDALE, FL 33308 US

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.

SIGNATURE: MAXIM H. ROMERO P 01/21/2008

Electronic Signature of Signing Officer or Director Date