

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000024053

FILED  
Dec 15, 2010  
Secretary of State

**Entity Name:** ALL SEASONS LANDSCAPING & NURSERY, CORP

**Current Principal Place of Business:**

301 RACQUET CLUB ROAD # 309  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 266438  
WESTON, FL 33326

**New Mailing Address:**

301 RACQUET CLUB ROAD # 309  
WESTON, FL 33326

FEI Number: 26-2124909

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARIN, RODRIGO  
301 RACQUET CLUB ROAD # 309  
WESTON, FL 33326 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: RODRIGO MARIN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARIN, RODRIGO  
Address: 301 RACQUET CLUB ROAD # 309  
City-St-Zip: WESTON, FL 33326

Title: VP  
Name: MESA, FLOR M  
Address: 301 RACQUET CLUB ROAD # 309  
City-St-Zip: WESTON, FL 33326

I hereby 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 all other like empowered.

SIGNATURE: RODRIGO MARIN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

SR

12/15/2010

\_\_\_\_\_  
Date