## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000058321

Entity Name: J & A NURSERY, INC.

FILED Jun 01, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

19460 SW 187 AVE MIAMI, FL 33187

**Current Mailing Address: New Mailing Address:** 

19460 SW 187 AVE MIAMI, FL 33187

FEI Number: 65-0765155 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

YZAGUIRRE, ANDRES 19460 SW 187 AVE MIAMI, FL 33187

COHN, ALAN B 100 WEST CYPRESS CREEK ROAD SUITE 700 FT. LAUDERDALE, FL 33309 US

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: ALAN B. COHN 06/01/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition YZAGUIRRE, ANDRES YZAGUIRRE, ANDRES Name: Name:

19460 SW 187 AVE 19460 SW 187 AVE Address: Address: City-St-Zip: MIAMI, FL 33187 City-St-Zip: MIAMI, FL 33187

Title: Title: DST (X) Change ( ) Addition () Delete Name:

SUAREZ, JOAQUIN Name: SUAREZ, JOAQUIN 19460 SW 187 AVE Address: 19460 SW 187 AVE Address: MIAMI, FL 33187 MIAMI, FL 33187 City-St-Zip: City-St-Zip:

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.

SIGNATURE: ANDRES YZAGUIRRE DP 06/01/2006