

**2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P97000058321

**FILED  
Aug 17, 2010  
Secretary of State**

**Entity Name:** J & A NURSERY, INC.

**Current Principal Place of Business:**

19460 SW 187 AVE  
MIAMI, FL 33187

**New Principal Place of Business:**

**Current Mailing Address:**

19460 SW 187 AVE  
MIAMI, FL 33187

**New Mailing Address:**

**FEI Number:** 65-0765155

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUAREZ, JOAQUIN B  
19460 SW 187 AVE  
MIAMI, FL 33187 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: YZAGUIRRE, ANDRES  
Address: 19460 SW 187 AVE  
City-St-Zip: MIAMI, FL 33187

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

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: ANDRES YZAGUIRRE

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08/17/2010

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

\_\_\_\_\_  
Date