

**2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000070830

**Entity Name:** TWQ LANDSCAPING, INC.

**Current Principal Place of Business:**

4350 SW 59TH AVE  
I-1  
DAVIE, FL 33314

**FILED**  
**Oct 13, 2014**  
**Secretary of State**  
**CC1282517605**

**Current Mailing Address:**

3601 W. BELL DR  
60  
DAVIE, FL 33328 US

**FEI Number:** 04-3699243

**Certificate of Status Desired:** Yes

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

ARISTIZABAL, RAMIRO  
3601 W. BELL DR  
60  
DAVIE, FL 33328 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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	PTD	Title	VP
Name	ARISTIZABAL, RAMIRO	Name	ARISTIZABAL, MAGDA
Address	3601 W. BELL DR. 60	Address	3601 W. BELLD 60
City-State-Zip:	DAVIE FL 33328	City-State-Zip:	DAVIE FL 33328
Title	EXECUTIVE SECRETARY	Title	OFFICER
Name	ARISTIZABAL, ALEJANDRO	Name	REYES, GUILLERMO E
Address	3601 W. BELL DR	Address	3601 W. BELL DR
City-State-Zip:	DAVIE FL 33328	City-State-Zip:	DAVIE FL 33328

*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:** RAMIRO ARISTIZABAL

**PRESIDENT**

**10/13/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date