

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000130370

**Entity Name:** ANTONIO'S NURSERY INC

**Current Principal Place of Business:**

5870 SW 76TH AVE  
DAVIE, FL 33328

**Current Mailing Address:**

6015 GARFIELD STREET  
HOLLYWOOD, FL 33024

**FEI Number:** 83-0406183

**Certificate of Status Desired:** No

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

GONZALEZ, IRVING J  
6015 GARFIELD STREET  
HOLLYWOOD, FL 33024 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	P	Title	VP
Name	VILARINO, ANTONIO	Name	VILARINO, NILDA E
Address	6015 GARFIELD STREET	Address	6015 GARFIELD STREET
City-State-Zip:	HOLLYWOOD FL 33024	City-State-Zip:	HOLLYWOOD FL 33024

*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:** ANTONIO VILARINO

**PRESIDENT**

**04/15/2016**

Electronic Signature of Signing Officer/Director Detail

Date