## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 634415** 

FILED Apr 07, 2009 Secretary of State

Entity Name: SUN STATE NURSERY & LANDSCAPING, INC.

Entity Nan	ne: SUN STA	ATE NURSERY & LANDSCAP	ING, INC.		
Current Principal Place of Business:			New Principal Place	of Business:	
	LIPS HIGHWA VILLE, FL 322				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	LIPS HIGHWA VILLE, FL 322				
FEI Number:	59-1962918	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
JACKSON\	DGRASS INLE VILLE, FL 322	250 US	purpose of changing its registere	ed office or registered agent, or both,	
in the State			parpose of changing ne regions	a emoc en regionere a agent, en bean,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Carr	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD ( KASSAB, PAUL 4147 CORDGE JAX BCH, FL 3	ASS INLET DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	ST ( ) KASSAB, PATF 4147 CORDGR		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: PAUL J. KASSAB PRES 04/07/2009