2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 24, 2006 08:00 AM Secretary of State DOCUMENT # G03250 LANDSCAPING ASSOCIATES INC. Principal Place of Business Mailing Address 26002 S.W. 107 AVENUE 26002 S.W. 107 AVENUE PRINCETON, FL 33032 US PRINCETON, FL 33032 04192006 No Chg-P GR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2231141 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROBAU, PEDRO DO NOT WRITE 26002 S.W. 107 AVENUE PRINCETON, FL 33032 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstaling) DATE Signature, typed or printed name of registered agent and title if applicable \$5.00 May Be 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution, Added to Fees OFFICERS AND DIRECTORS 10. PO TITLE ROBAU, PEDRO NAMO STREET ADDRESS 6720 SW 145TH STREET U000000527876 MIAMI, FL 33158 CITY-ST-ZIP 95/95/96-80015-008 150.00 TD 71T) F ROBAU, ANNE NAME STREET ADDRESS **6720 SW 145TH STREET** MIAMI, FL 33158 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CSTY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the Information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or flustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment withyan address with all other like empowered.

FICER OR DIRECTOR

SIGNATURE: .

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