2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 28, 2005 08:00 AM **DOCUMENT # H58995 Secretary of State** TRUSCOTTS USA, INC. Principal Place of Business Mailing Address 3727 TYRONE BLVD N. 1340 ROBIN RD S ST PETERSBURG, FL 33707 US ST PETERSBURG, FL 33710 No Chg-P CR2E034 (10/03) 01232005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2540003 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SUDHIR K. SHAH DO NOT WRITE 1340 ROBIN RD. SOUTH ST. PETERSBURG, FL 33707 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Added to Fees FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PVTS TITLE SHAH, SUDHIR K. NAME U00000201396 STREET ADDRESS 1340 ROBIN RD S ST PETERSBURG, FL 33707 01/28/05-80065-018 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME. STREET ADDRESS CITY-ST-ZIP

filing coes not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes 1 further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if all other like empowered. 12. I hereby certify that the information supplied with indicated on this report or supplemental reports of the corporation or the receiver or trustee endichanged, or on an attachment with an address.

SIGNATURE: _

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SUDHIR K. SHAH SIGNATURE AND TYPED OF

727-345-5501