


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 8:00 am**  
**Secretary of State**

01-22-2007 90073 035 \*\*\*150.00

<b>DOCUMENT # J74449</b> 1. Entity Name HORTICULTURAL CONSULTING SERVICES, INC.	
---	---

Principal Place of Business 764 SILVERWOOD DRIVE LAKE MARY, FL 32746	Mailing Address 764 SILVERWOOD DRIVE LAKE MARY, FL 32746
--	--

**DO NOT WRITE IN THIS SPACE**



01142007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2825941	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  YADAV, UDAY K 764 SILVERWOOD DRIVE LAKE MARY, FL 32746
---

**DO NOT WRITE  
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 reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YADAV, UDAY K. 764 SILVERWOOD DRIVE LAKEMARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST YADAV, REBECCA J. 764 SILVERWOOD DRIVE LAKEMARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Uday K. YADAV **CUDAY K. YADAV** January 16, 2007 407/330-5864  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT  
40003640  
Division of Corporations

## Annual Report

[Annual Report Help](#)

Document Number

J74449

Business Entity Name

**HORTICULTURAL CONSULTING SERVICES, INC.**

FEI Number

592825941

FEI Number Status

☒ Listed Above ☐ Applied For ☐ Not Applicable

Certificate of Status Desired

☐ Yes ☒ No \$8.75 each

Election Campaign Financing Trust Fund Contribution

☐ Yes ☒ No**Principal Place of Business**

Address

764 SILVERWOOD DRIVE

Suite, Apt. #, etc.

City, State

LAKE MARY

, FL

Zip Code &amp; Country

32746

**Mailing Address**

Address

764 SILVERWOOD DRIVE

Suite, Apt. #, etc.

City, State

LAKE MARY

, FL

Zip Code &amp; Country

32746

**Name and Address of Registered Agent**

Name (Last, First, Middle, Title)

YADAV

, UDAY

, K

**- OR -**

Business to serve as RA

Address (PO Box is not acceptable)

764 SILVERWOOD DRIVE

Suite, Apt. #, etc.

City, State

LAKE MARY

, FL

Zip Code &amp; Country

32746

US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

ATTACHMENT  
40003040  
#J4449

entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

**Registered Agent Signature**

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

**Officer/Director Name and Address**

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title P  
Name (Last, First, Middle, Title) \_\_\_\_\_

**- OR -**

Entity Name to serve as Officer/Director YADAV, UDAY K.

Street Address 764 SILVERWOOD DRIVE  
City, State LAKEMARY, FL  
Zip Code & Country 32746

Title ST  
Name (Last, First, Middle, Title) \_\_\_\_\_

**- OR -**

Entity Name to serve as Officer/Director YADAV, REBECCA J.

Street Address 764 SILVERWOOD DRIVE  
City, State LAKEMARY, FL  
Zip Code & Country 32746

Title \_\_\_\_\_  
Name (Last, First, Middle, Title) \_\_\_\_\_

**- OR -**

Entity Name to serve as Officer/Director \_\_\_\_\_

Street Address \_\_\_\_\_  
City, State \_\_\_\_\_, \_\_\_\_\_  
Zip Code & Country \_\_\_\_\_

Title \_\_\_\_\_