

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J75648

FILED
Jan 11, 2009
Secretary of State

Entity Name: ROSE GARDEN NURSERY CORPORATION

Current Principal Place of Business:

% ROBERTO PANDO
6401 SW 118TH AVE
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

% ROBERTO PANDO
287 LAS BRISAS CT
MIAMI GABLES, FL 331436500

New Mailing Address:

FEI Number: 65-0016365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANDO, ROBERTO
6401 SW 118TH AVE
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PANDO, ROBERTO
Address: 6401 SW 118TH AVE
City-St-Zip: MIAMI, FL

Title: VP () Delete
Name: PANDO, EMILIO
Address: 6401 SW 118 AVE
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: PANDO, ROSE ELENA
Address: 6401 SW 118
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: PANDO, CARMELA
Address: 6401 SW 118 AVE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERTO PANDO

DP

01/11/2009

Electronic Signature of Signing Officer or Director

_____ Date