2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013131

Entity Name: DADELAND ORNAMENTAL BROKERAGE NURSERY, LLC

FILED Jan 17, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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14740 SW 98 AVENUE 14740 SW 98 AVENUE MIAMI, FL 33176 MIAMI, FL 331767865

Current Mailing Address: New Mailing Address:

14740 SW 98 AVENUE 14740 SW 98 AVENUE MIAMI, FL 33176 MIAMI, FL 331767865

FEI Number: 80-0030802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 ISSA, VICTOR
 ISSA, VICTOR

 14740 SW 98 AVENUE
 14740 SW 98 AVENUE

 MIAMI, FL 33176
 MIAMI, FL 331767865

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: 01/17/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

Fitle: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 ISSA, VICTOR
 Name:
 ISSA, VICTOR

 Address:
 14740 SW 98 AVENUE
 Address:
 14740 SW 98 AVENUE

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 331767865

Title: MGRM () Delete Title: () Change () Addition

 Name:
 BORKOWSKI, MICHAEL
 Name:

 Address:
 190 SE 19 AVE
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33060
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 AHEARN, THOMAS
 Name:

 Address:
 190 SE 19 AVE
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33060
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:GRUNSKLS, ALFONSEName:GRUNSKIS, ALFONSEAddress:6901 E CYPRESSHEAD DRAddress:6901 E CYPRESSHEAD DRCity-St-Zip:POMPANO BEACH, FL 33067City-St-Zip:POMPANO BEACH, FL 33067

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL A. BORKOWSKI MGMR 01/17/2004