FILED
Jun 04, 2007 08:00 AM
Secretary of State

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000019820

1. Entity Name
ON WHEEL'S LANDSCAPING LLC

Principal Place of Business	Mailing Address
2360 VIRGINIA DR ALTAMONTE SPRINGS, FL 32714	PO BOX 161001 ALTAMONTE SPRINGS, FL 32714-1001

DO NOT WRITE IN THIS SPACE

05162007No Chg-LLC CR2E083 (11/05)

4. FEI Number
41-2054711
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

YORDAN, LILLIAN
2360 VIRGINIA DR
ALTAMONTE SPRINGS, FL 32714

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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 _____ DATE
Signature of new registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 14, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MAYMI, ROBERTO SR.
STREET ADDRESS	2360 VIRGINIA DR
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714
TITLE	MGRM
NAME	YORDAN, LILLIAN T SRA.
STREET ADDRESS	2360 VIRGINIA DR
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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11. 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 is true and accurate and that my 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: Lillian Yordan - LILLIAN Yordan 5/31/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #