

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000111888

FILED  
May 02, 2007  
Secretary of State

Entity Name: LUSHSCAPES, LLC

**Current Principal Place of Business:**

4451 SW 93RD AVENUE  
DAVIE, FL 33328 FL

**New Principal Place of Business:**

**Current Mailing Address:**

4451 SW 93RD AVENUE  
DAVIE, FL 33328 FL

**New Mailing Address:**

FEI Number: 20-5940877      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SINKOE, JANEL  
4862 HIBBS GROVE WAY  
COOPER CITY, FL 33330 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DOZERINI, LLC,  
Address: 4862 HIBBS GROVE WAY  
City-St-Zip: COOPER CITY, FL 33330 US

Title: MGR ( ) Delete  
Name: FALKO CREATIONS, LLC,  
Address: 320 NE49TH STREET  
City-St-Zip: OAKLAND PARK, FL 33334 US

Title: MGR ( ) Delete  
Name: CAMBRIDGE LANDSCAPIN, G SERVICES, LL C  
Address: 2420 NW 33RD STREET, APT 1010  
City-St-Zip: OAKLAND PARK, FL 33309 US

**ADDITIONS/CHANGES:**

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 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: JANEL SINKOE

MGR

05/02/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date