2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2009
Secretary of State

DOCUMENT# L96456

Entity Name: BROTHERS MALAYA NURSERY, INC.

Current Principal Place of Business:

12700 SW 66 ST.
FT LAUDERDALE, FL 33330

New Principal Place of Business:

Current Mailing Address:

12700 SW 66 ST.
FT LAUDERDALE, FL 33330

New Mailing Address:

FEI Number: 65-0216801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIDALGO, ANTONIO
5001 SW 131 AVE.
MIRAMIR, FL 33027 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HIDALGO, ANTONIO
Address: 5001 SW 131 AVE.
City-St-Zip: MIRAMIR, FL 33027

Title: D ( ) Delete
Name: HIDALGO, FRANCISCO
Address: 16431 N.E. 34TH AVE.
City-St-Zip: N MIAMI BEACH, FL

Title: D ( ) Delete
Name: HIDALGO, JULIAN
Address: 16097 SW 24 ST.
City-St-Zip: TEMBROKE PINE, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: HIDALGO, FRANCISCO
Address: 12831 MUSTANG TRAIL
City-St-Zip: SOUTHWEST RANCHES, FL 33330

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: ANTONIO HIDALGO D 07/10/2009

Electronic Signature of Signing Officer or Director Date