


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # M14078  
 1. Entity Name  
 E & G ORTIZ LANDSCAPING, INC.



Principal Place of Business      Mailing Address  
 8661 PASADENA BLVD.,      8661 PASADENA BLVD.,  
 PEMBROKE PINES, FL 33024-3338 US      PEMBROKE PINES, FL 33024-3338 US

**DO NOT WRITE IN THIS SPACE**



04112005    No Chg-P    CR2E034 (10/03)

4. FEI Number      Applied For  
 59-2522528      Not Applicable

5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 KENNETH MUELLER  
 5721 SW 164 TERRACE  
 FT LAUDERDALE, FL  
 FT LAUDERDALE, FL 33331

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MUELLER, KENNETH
STREET ADDRESS	5721 SW 164 TERRACE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33321
TITLE	T
NAME	ORTIZ, CARMEN
STREET ADDRESS	8661 PASADENA BLVD
CITY-ST-ZIP	PEMBROKE PINES, FL 33024
TITLE	VP
NAME	MUELLER, CARMEN S
STREET ADDRESS	5721 SW 164 TERRACE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33331
TITLE	SD
NAME	ORTIZ, ELMO
STREET ADDRESS	8661 PASADENA BLVD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33331
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/25/05-80076-018 150.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Elmo Ortiz      Elmo Ortiz      4/22/05      954-438-6087  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #