

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M63941

FILED  
Jul 02, 2007  
Secretary of State

Entity Name: PLASENCIA NURSERY, INC.

**Current Principal Place of Business:**

11801 S.W. 72ND ST.  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

11801 S.W. 72ND ST.  
MIAMI, FL 33183

**New Mailing Address:**

FEI Number: 65-0021511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PLASENCIA, JESUS  
11801 S.W. 72ND ST.  
MIAMI, FL 33183 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: P ( ) Delete  
Name: PLASENCIA, JESUS,  
Address: 241 N.W. 48TH PLACE  
City-St-Zip: MIAMI, FL

Title: T ( ) Delete  
Name: PLASENCIA, LOURDES  
Address: 241 NW 48TH PLACE  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: PLASENCIA, JESUS L  
Address: 15610 SW 146 AVE  
City-St-Zip: MIAMI, FL

Title: S ( ) Delete  
Name: PLASENCIA, GLADYS  
Address: 15610 SW SW 146TH AVE  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: JESUS PLASENCIA

P

07/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date