

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008267

FILED  
May 01, 2006  
Secretary of State

**Entity Name:** UNITED LANDSCAPERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8511 SW 27 TERRACE  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

8511 SW 27 TERRACE  
MIAMI, FL 33155

**New Mailing Address:**

**FEI Number:** 02-0650053      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PEREZ, LUIS  
8511 SW 27 TERRACE  
MIAMI, FL 33155      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

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: PEREZ, LUIS  
Address: 8511 SW 27 TERRACE  
City-St-Zip: MIAMI, FL 33155

Title: VD      ( ) Delete  
Name: VALDES, ANTHONY  
Address: 4915 SW 102 PLACE  
City-St-Zip: MIAMI, FL 33165

Title: TD      ( ) Delete  
Name: SALAS, MIGUEL  
Address: 1080 NW 128 COURT  
City-St-Zip: MIAMI, FL 33182

Title: VD      ( ) Delete  
Name: BERMUDEZ, PEDRO  
Address: 9325 SW 43RD TERRACE  
City-St-Zip: MIAMI, FL 33165

Title: VD      ( ) Delete  
Name: QUESADA, EDGAR  
Address: 15391 SW 143 AVENUE  
City-St-Zip: MIAMI, FL 33177

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS PEREZ

PD

05/01/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date