2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 02, 2007 08:00 AM Secretary of State DOCUMENT # P00000019247 1. Entity Name S & E LANDSCAPING, INC. Principal Place of Business Mailing Address 4781 NW 75TH ST 4781 NW 75TH ST COCONUT CREEK, FL 33073 COCONUT CREEK, FL 33073 03152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0989029 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BITAR, ELIAS A DO NOT WRITE 4781 NW 75TH STREET COCONUT CREEK, FL 33073 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees U00000685475 94/09/97-80008-008-150.00 OFFICERS AND DIRECTORS 10. TITLE BITAR, ELIAS A NAME STREET ADDRESS 4781 NW 75TH ST CITY-ST-ZIP COCONUT CREEK, FL 33073 TITLE NAME BITAR, SANDRA A 4781 NW 75TH ST STREET ADDRESS CITY-ST-ZIP COCONUT CREEK, FL 33073 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TM F NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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:

STREET ADORESS CITY-ST-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

3/29/07

954 481-845

Daylame Phone #

FILED