2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2009
Secretary of State

DOCUMENT# P00000021392

Entity Name: VELIZ ORNAMENTAL NURSERY CORP.

Current Principal Place of Business:

16401 SW 216 STREET
MIAMI, FL 33170

New Principal Place of Business:

Current Mailing Address:

16401 SW 216 STREET
MIAMI, FL 33170

New Mailing Address:

FEI Number: 65-0995808 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VELIZ, YSRAEL
20819 SW 127TH COURT
MIAMI, FL 33177 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: PD ( ) Delete
Name: VELIZ, YSRAEL
Address: 20819 SW 127TH COURT
City-St-Zip: MIAMI, FL 33177

Title: VD ( ) Delete
Name: VELIZ, ISRAEL
Address: 20819 SW 127TH COURT
City-St-Zip: MIAMI, FL 33177

Title: SDT ( ) Delete
Name: VELIZ, ISAEL
Address: 20819 SW 127TH COURT
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: SDT (X) Change ( ) Addition
Name: VELIZ, ISAEL
Address: 20819 SW 127 COURT
City-St-Zip: MIAMI, FL 33177

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: YSRAEL VELIZ PD 09/02/2009

Electronic Signature of Signing Officer or Director Date