

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002137

FILED
May 02, 2008
Secretary of State

Entity Name: SOUTHERN SCAPES NURSERY INC.

Current Principal Place of Business:

6660 NW 81ST TERRACE
PARKLAND, FL 33067

New Principal Place of Business:

New Mailing Address:

7040 W. PALMETTO PARK ROAD
4-844
BOCA RATON, FL 33433

Current Mailing Address:

6660 NW 81ST TERRACE
PARKLAND, FL 33067

FEI Number: 65-1067827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FABERMAN, RONALD S
6660 NW 81ST TERRACE
PARKLAND, FL 33067 US

Name and Address of New Registered Agent:

FABERMAN, RONALD S
7040 W. PALMETTO PARK RD
4-844
BOCA RATON, FL 33433 US

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:

05/02/2008

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: FABERMAN, RONALD S
Address: 6660 NW 81ST TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: S (X) Delete
Name: FABERMAN, KARRI JO
Address: 6660 NW 81ST TERRACE
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FABERMAN, RONALD S
Address: 7040 W. PALMETTO PARK RD., SUITE 4-844
City-St-Zip: BOCA RATON, FL 33433

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: RONALD S FABERMAN

PD

05/02/2008

Electronic Signature of Signing Officer or Director

Date