

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024377

FILED
Feb 16, 2007
Secretary of State

Entity Name: LAMPSCAPE DESIGNS CORP.

Current Principal Place of Business:

P.O. BOX 770506
MIAMI, FL 33177

New Principal Place of Business:

12250 SW 132 CT
102
MIAMI, FL 33186

Current Mailing Address:

P.O. BOX 770506
MIAMI, FL 33177

New Mailing Address:

FEI Number: 65-1084927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALACIOS, ADRIAN J
12250 SW 132 COURT
UNIT 102
MIAMI, FL 33186 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PALACIOS, ADRIAN J P
Address: 16944 SW 141 STREET
City-St-Zip: MIAMI, FL 33177

Title: V () Delete
Name: QUINTANA, EDMUNDO W V
Address: 20980 SW 246 STREET
City-St-Zip: HOMESTEAD, FL 33031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PALACIOS, ADRIAN J P
Address: 13345 SW 47 STREET
City-St-Zip: MIRAMAR, FL 33027

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADRIAN PALACIOS

P

02/16/2007

Electronic Signature of Signing Officer or Director

_____ Date