2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 01, 2007
Secretary of State

DOCUMENT# P01000052171

Entity Name: ALL LAWN & LANDSCAPING INC.

Current Principal Place of Business:

5626 4 AVE N
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

5626 4 AVE N
SAINT PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-3730646 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAMES ACCOUNTING & TAP SER. INC.
2942 49TH ST. N.
SAINT PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

LOWE, ANTHONY
5626 4TH AVENUE NORTH
SAINT PETERSBURG, FL 33710 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: ANTHONY LOWE 10/01/2007
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: LOWE, ANTHONY
Address: 5626 4TH AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33710

Title: SD ( ) Delete
Name: FINLAYSON, MARY
Address: 5626 4TH AVE NORTH
City-St-Zip: ST PETERSON, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ANTHONY LOWE PD 10/01/2007
Electronic Signature of Signing Officer or Director Date