2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2006 08:00 AM **DOCUMENT # P01000054725 Secretary of State** HARDSCAPE LANDSCAPE, INC. Mailing Address Principal Place of Business 1214 NE 4TH TERR 1214 NE 4TH TERR. CAPE CORAL, FL 33909 CAPE CORAL, FL 33909 CR2E034 (11/05) 04202008 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1107877 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent SCHROEDER, SCOTT DO NOT WRITE 1214 NE 4TH TERR. CAPE CORAL, FL 33909 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. (NDTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE SCHROEDER, SCOTT NAME STREET ADDRESS 1214 NE 4TH TERR. CITY-ST-27P CAPE CORAL, FL 33909 TITLE NAME STREET ADDRESS 000000535312 05/08/06-80048-806 150.00 CITY-ST-202 TITLE NAME STREET ADDRESS DO NOT WRITE CSTY-ST-ZIP IN THIS SPACE TITLE NASAF STREET ADDRESS CITY-ST-ZIP 3.m NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 it made under outs, that I am an officer or director of the corporation of 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.

O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STONATURE AND TYPED OF

SIGNATURE:

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