## 2006 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** May 01, 2006 08:00 Al **Secretary of State** DOCUMENT # P01000062642 VILA'S LANDSCAPING, INC. Principal Place of Business Mailing Address 252 WEST 35 STREET 252 WEST 35 STREET HIALEAH, FL 33012 HIALEAH, FL 33012 04282006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1115797 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RODRIGUEZ, JORGE 252 WEST 35 STREET HIALEAH, FL 33012 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 (NOTE: Registered Agent stonature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550,00 OFFICERS AND DIRECTORS 10. PVTD TITLE RODRIGUEZ, JORGE NAME STREET ADDRESS 252 W. 35 ST CITY-ST-ZIP HIALEAH, FL 33012 U00000554305 05/15/06-80086-023 150.00 TITLE LUGARDO, YOLANDA NAME STREET ADDRESS 252 W. 35 ST CITY-ST-ZIP HIALEAH, FL 33012 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS

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 if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP



Daylime Phone 4