

2002
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90736 034 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT

2001



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000094512

1. Corporation Name *arm's nursery & Landscaping inc*
Telemarketing Investment Inc.

Principal Place of Business
12552 S.W. 210th P.O. Box 770 774
miami, FL 33177 - miami, FL 33177

DO NOT WRITE IN THIS SPACE

80061817

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
1 Suite, Apt. #, etc.	26 P.O. Box 770774	65-1142131	Not Applicable
2 City & State	27 Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
3 Zip	28 miami FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Country	29 33177	8. This corporation owes the current year Intangible Personal Property Tax.	Yes No

9. Name and Address of Current Registered Agent
Moses del Val
12552 S.W. 210th
miami, FL 33177

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
FILE	NAME	11 TITLE	Change Addition
FILE	12552 S.W. 210th	12 NAME	
FILE	miami, FL 33177	13 STREET ADDRESS	
FILE		14 CITY-ST-ZIP	
FILE		21 TITLE	Change Addition
FILE		22 NAME	
FILE		23 STREET ADDRESS	
FILE		24 CITY-ST-ZIP	
FILE		31 TITLE	Change Addition
FILE		32 NAME	
FILE		33 STREET ADDRESS	
FILE		34 CITY-ST-ZIP	
FILE		41 TITLE	Change Addition
FILE		42 NAME	
FILE		43 STREET ADDRESS	
FILE		44 CITY-ST-ZIP	
FILE		51 TITLE	Change Addition
FILE		52 NAME	
FILE		53 STREET ADDRESS	
FILE		54 CITY-ST-ZIP	
FILE		61 TITLE	Change Addition
FILE		62 NAME	
FILE		63 STREET ADDRESS	
FILE		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

305-321-4689