



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 04, 2008 8:00 am
Secretary of State

06-04-2008 90010 002 ***150.00

DOCUMENT # P01000115086	
1. Entity Name J. METAYER LANDSCAPING, INC.	
Principal Place of Business 2062 NW 43 TERRACE #5 LAUDERHILL, FL 33313	  Jumel Metayer PO Box 190143 Fort Lauderdale FL 33319



05052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0553881	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

METAYER, JUMEL
2062 NW 43 TERRACE #5
LAUDERHILL, FL 33313

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 signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	METAYER, JUMEL
STREET ADDRESS	2062 NW 43 TERR #5
CITY - ST - ZIP	LAUDERHILL, FL 33312
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/4/08 754 234 6012
Date Daytime Phone #

ATTACHMENT

40107890

P01000115086

J. Metayer Landscaping Inc.

Please make a Report

(1) ~~DO~~ Old Address Change:
2062 NW 43 Rd TERRACE
APT # 5
CAUDERHILL, FLORIDA 33313

(2) New Address IS
P.O. BOX 190143
FORT LAUDERDALE FLORIDA 33319

Sig
J. Metayer Land. INC.