2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000116242

Name:

Address:

City-St-Zip:

FILED Oct 05, 2005 Secretary of State

Entity Name: SMG LANDSCAPE SERVICE, INC. **Current Principal Place of Business: New Principal Place of Business:** 13811 ROANOKE ST. DAVIE, FL 33325 **Current Mailing Address: New Mailing Address:** P.O. BOX 290806 DAVIE, FL 33329 FEI Number: 65-1158217 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GALOR, SANDRA M 13811 ROANOKE ST. DAVIE, FL 33325 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GALOR, SANDRA M Name: Name: P.O. BOX 290806 Address: Address: City-St-Zip: **DAVIE, FL 33329** City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: LUPO, SIGRID Address: 13811 ROANOKE STREET Address: **DAVIE, FL 33325** City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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.

Name:

Address:

City-St-Zip:

LUPO, PHILIP

DAVIE, FL 33325

13811 ROANOKE STREET

SIGNATURE: SANDRA M GALOR 10/05/2005 D