2007 FOR PROFIT CORPORATION ANNUAL REPORT '

FILED Feb 19, 2007 08:00 A Secretary of State

Daytime Phone #

						~ ~ ~ ~	
DOCUMENT # P02000070496 1. Entity Name GREENLEAF LAWN & LANDSCAPING INC.				Secretary of S			
Principal Plac 20 SW 5TH S STUART, FL		Mailing Address 20 SW 5TH ST. STUART, FL 34994					
DO NOT WRITE IN THIS SPAC			O2142007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 30-0099363 Not Applicab 5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name and Address of Current Re	gistered Agent					
TORO, JEORGE R 20 SW 5TH ST. STUART, FL 34994					NOT W THIS SF		
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).							
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be led to Fees			
10.	OFFICERS AND DI	RECTORS			Unnnor	1640526	
NAME STREET ADDRESS CITY-ST-ZIP	P TORO, JEORGE R 5000 SE FEDERAL HWY #210 STUART, FL 34997			02/28/07-	0640526 -80070-012 150,90		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				_	NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	*				٠.		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Uturther 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.

LE SUPPLIED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: 💃