

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90043 008 ***150.00

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1. Entity Name
GROUNDKEEPERS, INC.



Principal Place of Business

8004 NW 154 ST.
SUITE #330
MIAMI LAKES, FL 33016

Mailing Address

8004 NW 154 ST.
SUITE #330
MIAMI LAKES, FL 33016

00030893



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01202005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

74-3055634

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOSE M DE LAO
1108 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent

Name **RENE DIAZ, ESQ.**

Vila, Padron & Diaz, P.A.

Street Address (P.O. Box Number is Not Acceptable)

2 Alhambra Plaza, Suite 860

Coral Gables, Florida 33134

City

FL

Zip Code

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

After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE S
NAME HASSUN GONZALEZ, LISSETTE M
STREET ADDRESS 8004 NW 154 STREET, #330
CITY-ST-ZIP MIAMI LAKES, FL 33016 ☐ Delete

TITLE T
NAME FERNANDEZ, LOURDES
STREET ADDRESS 8004 NW 154 ST.
CITY-ST-ZIP MIAMI LAKES, FL 33016 ☐ Delete

TITLE V
NAME FERNANDEZ, ALEXANDER
STREET ADDRESS 8004 NW 154 ST.
CITY-ST-ZIP MIAMI LAKES, FL 33016 ☐ Delete

TITLE P
NAME GONZALEZ, ANDREW
STREET ADDRESS 8004 NW 154 ST.
CITY-ST-ZIP MIAMI LAKES, FL 33016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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

Date

Daytime Phone #

Andrew P. Gonzalez

3/23/05 1954 885,021