


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 08:00 AM
Secretary of State

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| DOCUMENT # P02000087692 |  |
| 1. Entity Name MYERS PAINTING & LAWN, INC. | |

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| Principal Place of Business 8101 SW 9TH COURT NORTH LAUDERDALE, FL 33068 | Mailing Address 8101 SW 9TH COURT NORTH LAUDERDALE, FL 33068 |
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DO NOT WRITE IN THIS SPACE



04272008 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 06-1643375 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent MYERS, BEN 8101 SW 9TH COURT NORTH LAUDERDALE, FL 33068 | DO NOT WRITE IN THIS SPACE |
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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 renewing) 1000000942209
06/03/08-80022-007 150.00

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MYERS, BEN 8101 SW 9TH COURT NORTH LAUDERDALE, FL 33068 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MYERS, ROBERT F 8120 SW 9TH COURT NORTH LAUDERDALE, FL 33068 |
| 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 | |

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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 empowerments.

SIGNATURE:  **PRESIDENT**
BEN MYERS 454
726-6335
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **5-1-08**
Date **726-6335**
Daytime Phone #