


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000108471

1. Entity Name
EL SALVADOR LANDSCAPING CORP.



Principal Place of Business Mailing Address

26711 SW 133RD COURT 26711 SW 133RD COURT
 NARANJA, FL 33032 NARANJA, FL 33032

DO NOT WRITE IN THIS SPACE



05182006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
82-0568155 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NUNEZ, HUGO
 26711 SW 133RD COURT
 NARANJA, FL 33032

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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: Hugo E. Nunez DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

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 NAME STREET ADDRESS CITY-ST-ZIP	PD NUNEZ, HUGO 26711 SW 133RD COURT NARANJA, FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CONTRERAS, CRISANTA 26711 SW 133RD COURT NARANJA, FL 33032
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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 empowered.

SIGNATURE: Hugo E. Nunez Date: _____ Daytime Phone #: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR