2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 20, 2005 8:00 am Secretary of State 04-20-2005 90299 046 ***158.75 **DOCUMENT # P02000119000** LOPEZ LANDSCAPING, DESIGN AND IRRIGATION, INC. Mailing Address Principal Place of Business 4420 JOG ROAD 4420 JOG ROAD LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 03082005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2386563 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FILINGS, INC. 3732 N.W. 16TH STREET FORT LAUDERDALE, FL 33311 IN THIS SPACE 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, 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, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE NAME LOPEZ, EDWIN SR. STREET ADDRESS 4420 JOG ROAD CITY-ST-ZIP LAKE WORTH, FL 33467 VST TITLE LOPEZ, FRANCES E NAME STREET ADDRESS 4420 JOG ROAD CITY-ST-7IP LAKE WORTH, FL 33467 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and changed, or on an attachment with an address, with all other like empowered. i), Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director at d that my name appears in Block 10 or Block 11 if

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

964-8381

FILED