# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 12, 2008 08:00 A**
**Secretary of State**

DOCUMENT # P02000129691

1. Entity Name
MARRERO AND SON LAWN SERVICE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 13250 SW 135TH AVENUE<br>MIAMI, FL 33186 | 13250 SW 135TH AVENUE<br>MIAMI, FL 33186 |

DO NOT WRITE IN THIS SPACE

03072008 No Chg-P CR2E034 (11/05)

4. FEI Number
56-2310582

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RIOS, RAFAEL
13250 SW 135TH AVENUE
MIAMI, FL 33186

DO NOT WRITE 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 _____ 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**
**After May 1, 2008 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000085612
03/27/08-80057-006 158.75

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | PTD |
| NAME | RIOS, RAFAEL |
| STREET ADDRESS | 10320 SW 139 ST. |
| CITY-ST-ZIP | MIAMI, FL 33176 |
| TITLE | DVS |
| NAME | MARRERO, GERARDO |
| STREET ADDRESS | 13250 SW 135TH AVENUE |
| CITY-ST-ZIP | MIAMI, FL 33186 |
| 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 | |

DO NOT WRITE IN THIS SPACE

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:** _____ 3/7/08 305-259-1153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #