


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000012254

1. Entity Name
FLOATING GARDENS, INC.



Principal Place of Business 6861 SW147TH AVE APT # 2A MIAM, FL 33193	Mailing Address 6861 SW147TH AVE APT # 2A MIAM, FL 33193
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DO NOT WRITE IN THIS SPACE



02192007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2271822	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**MONTES, RICARDO
 6861 SW 147TH AVE
 APT # 2A
 MIAMI, FL 33193**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Signature: typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2007 Fee will be \$590.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MONTES, RICARDO 6861 SW 147TH AVE APT 2-A MIAMI, FL 33193
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O ALBERTO, ARROYO 6861 SW 147TH AVE APT 2-A MIAMI, FL 33193
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 03/05/07-80005-010 150.00

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 or assignee 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: *Ricardo Montes* **Ricardo Montes** 02/19/2007 (305)3808295

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #