## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000030351

Entity Name: JBL LANDSCAPING, INC

FILED Jan 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

11040 NW 19 STREET 2900 NW 214 ST

PEMBROKE PINES, FL 33026 MIAMI, FL 33056 US US

**Current Mailing Address: New Mailing Address:** 

11040 NW 19 STREET 2900 NW 214 ST

PEMBROKE PINES, FL 33026 US MIAMI, FL 33056 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MELVIN, LAKECHEA TROUTMAN, KEVIN 11040 NW 19TH STREET 2900 NW 214 ST

PEMBROKE PINES, FL, FL 33026 US US MIAMI, FL 33056

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.

SIGNATURE: KEVIN TROUTMAN 01/13/2006

> Electronic Signature of Registered Agent Date

> > Title:

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In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: (X) Change ( ) Addition

MELVIN, LAKCHIA TROUTMAN, KEVIN Name: Name: 2900 NW 214 ST 11040 NW 19 STREET Address: Address:

City-St-Zip: PEMBROKE PINES, FL 33026 US City-St-Zip: MIAMI, FL 33056 US

() Delete (X) Change ( ) Addition Name: STOKES, BERNARD Name: TROUTMAN, LATONYA 2900 NW 214 ST 18700 SW 90TH AVE Address: Address: MIAMI, FL 33157 US MIAMI, FL 33056 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: TS (X) Change ( ) Addition

TROUTMAN, LATONYA Name: WILLIAMS, MARTHA Name: 2900 NW 214 STREET Address: 2900 NW 214 ST Address: City-St-Zip: PEMBROKE PINES, FL 33026 City-St-Zip: MIAMI, FL 33056

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN TROUTMAN D 01/13/2006