


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 27, 2008 8:00 am
Secretary of State

05-27-2008 90040 008 ***150.00

DOCUMENT # P03000063720 1. Entity Name MICHAEL'S LANDSCAPING SERVICES, INC.	
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Principal Place of Business 1346 40 AVE VERO BEACH, FL 32960	Mailing Address P.O. BOX 2502 VERO BEACH, FL 32961
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DO NOT WRITE IN THIS SPACE




04222008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0550215	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SIMONS, MICHAEL 1346 40 AVE VERO BEACH, FL 32960
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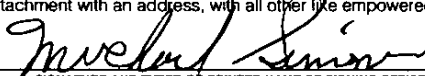
**DO NOT WRITE
IN THIS SPACE**

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 MICHAEL SIMONS <small>Signature, typed or printed name of registered agent and title if applicable.</small>	 <small>(NOTE: Registered Agent signature required when reinstating)</small>	3/24/08 <small>DATE</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT SIMONS, MICHAEL P.O. BOX 2502 VERO BEACH, FL 32961
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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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	3/24/08 772 4737686 <small>Date Daytime Phone #</small>