2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2006
Secretary of State

DOCUMENT# P03000064957

Entity Name: SEGICA LANDSCAPE INC.

Current Principal Place of Business:

1561 NE. 10TH STREET
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 92-4317
PRINCETON, FL 33092

New Mailing Address:

FEI Number: 14-1889851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ARTIGA, CARLOS
1561 NE. 10TH STREET
HOMESTEAD, FL 33033 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

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: P ( ) Delete
Name: ARTIGA, CARLOS
Address: 1561 NE. 10TH STREET
City-St-Zip: HOMESTEAD, FL 33033

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ARTIGA, CARLOS
Address: 1561 NE. 10TH STREET
City-St-Zip: HOMESTEAD, FL 33033

Title: DVP ( ) Change (X) Addition
Name: ARTIGA, HEROLDANY
Address: 66 BEACHWOOD DRIVE
City-St-Zip: DOUGLAS, GA 31533

Title: DST ( ) Change (X) Addition
Name: GUTIERREZ, CARLOS
Address: 1561 NE. 10TH STREET
City-St-Zip: HOMESETAD, FL 33033

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: CARLOS ARTIGA DP 05/31/2006

Electronic Signature of Signing Officer or Director Date