2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 15, 2006 08:00 AM Secretary of State DOCUMENT # P03000070358 PARADISE LAWN MAINTENANCE, INC. Principal Place of Business Mailing Address 106 S.E. SUPERIOR WAY 106 S.E. SUPERIOR WAY STUART, FL 34997 STUART, FL 34997 02092006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-4256978 Not Applicab! \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BASS, DONALD L DO NOT WRITE 7166 S.E. OSPREY STREET HOBE SOUND, FL 33455 IN THIS SPACE 6. 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. Signature, typed or printed name of registered egent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PS TIDE TOMAS, ANDRES NAME STREET ADDRESS 106 S.E. SUPERIOR WAY CITY-ST-ZIP STUART, FL. 34997 TIFLE NAME U00000434968 02/25/06-80023-015 150,00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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: _ Temas

TITLE NAME STREET ADDRESS CITY-ST-ZIP

2-13-06

FILED