

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000086294

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Entity Name:** DIXIE GARDEN NURSERY, INC.

**Current Principal Place of Business:**

14949 NW 117 AVE  
MIAMI, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

17801 NW 137 AVE  
HIALEAH GARDENS, FL 33018

**New Mailing Address:**

**FEI Number:** 84-1642032

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERNANDEZ, MILEXYS  
17801 NW 137 AVENUE  
HIALEAH GARDENS, FL 33018 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** FERNANDEZ, MILEXYS  
**Address:** 17801 NW 137 AVE  
**City-St-Zip:** HIALEAH GARDENS, FL 33018

**Title:** V  
**Name:** FERNANDEZ, ULISES  
**Address:** 17801 NW 137 AVE  
**City-St-Zip:** HIALEAH GARDENS, FL 33018

I hereby 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 all other like empowered.

**SIGNATURE:** MILEXYS FERNANDEZ

P

04/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date