

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000131692

**Entity Name:** NEW GREEN NURSERY, INC.

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

761 NW 217 WAY  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

761 NW 217 WAY  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:** 56-2413455

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVERA, ABEL  
761 NW 217 WAY  
PEMBROKE PINES, FL 33029 US

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

AQUINO, LILIAM  
761 NW 217 WAY  
PEMBROKE PINES, FL 33029 US

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: LILIAM AQUINO

04/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: AQUINO, LILIAM  
Address: 761 NW 217 WAY  
City-St-Zip: PEMBROKE PINES, FL 33029 US

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: LILIAM AQUINO

P

04/24/2012

Electronic Signature of Signing Officer or Director

Date