2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 09, 2007 08:00 AN DOCUMENT # P04000041430 **Secretary of State** 1. Entity Name URBAN LANDSCAPE, INC. Principal Place of Business Mailing Address 3250 MARY STREET 3250 MARY STREET SUITE 301 SUITE 301 COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133 01052007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0866564 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent ATRIUM REGISTERED AGENTS, INC. DO NOT WRITE 1500 SAN REMO AVENUE **SUITE 125** IN THIS SPACE CORAL GABLES, FL 33146 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. U00000580154 01/10/07<u>-80032-024</u> 158.75 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS MILE KAME CURTIS, AIDA 3250 MARY ST STE 301 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33133 ROGERS, RICHARD H NAME STREET ADDRESS **3250 MARY ST** CITY-ST-ZIP MIAMI, FL 33133 MILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-78P TITLE STREET ADDRESS CITY-ST-ZIP

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 inclicated 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Daytime Phone #