


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90066 046 ***150.00

DOCUMENT # P04000056231	
1. Entity Name DGW LANDSCAPE, INC.	

Principal Place of Business 617 W. INDUSTRIAL AVENUE BOYNTON BEACH, FL 33426	Mailing Address 617 W. INDUSTRIAL AVENUE BOYNTON BEACH, FL 33426
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Po Box 243383 Suite, Apt. #, etc.
City & State	City & State BOYNTON BCH FL
Zip Country	Zip Country 33424-3383 USA

01302005 Chg-P CR2E034 (10/03)

4. FEI Number 20-1035787	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent YOHE, MARK D % M.Y. FUTURE 680 W INDUSTRIAL AVENUE #4 BOYNTON BEACH, FL 33426	
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7. Name and Address of New Registered Agent Name DAVID WAGNER Street Address (P.O. Box Number is Not Acceptable) 9725 WOODWIND LANE City LAKE WORTH FL Zip Code 33467	
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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. SIGNATURE <i>David Wagner</i> - PRESIDENT - DATE 1/31/05 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAGNER, DAVID G 9725 WOODWIND LANE LAKE WORTH, FL 33467 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an other like empowered.	
SIGNATURE: <i>David Wagner</i> - PRESIDENT - DATE 1/31/05 (561) 734-8769 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Daytime Phone #</small>