

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000074616

Entity Name: PENSKI LANDSCAPE, INC.

FILED
Aug 30, 2005
Secretary of State

Current Principal Place of Business:

3691 NW 115TH TERRACE
SUNRISE, FL 33323

New Principal Place of Business:

3900 NW 113 AVE
SUNRISE, FL 33323

Current Mailing Address:

3691 NW 115TH TERRACE
SUNRISE, FL 33323

New Mailing Address:

3900 NW 113 AVE
SUNRISE, FL 33323

FEI Number: 20-1106053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENSKI, JAMES
3691 NW 115TH TERRACE
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

PENSKI, JAMES
3900 NW 113 AVE
SUNRISE, FL 33323 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:

08/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PENSKI, JAMES
Address: 3691 NW 115TH TERRACE
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PENSKI, JAMES
Address: 3900 NW 113 AVE
City-St-Zip: SUNRISE, FL 33323

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JAMES PENSKI

PD

08/30/2005

Electronic Signature of Signing Officer or Director

Date