FILED
Jun 10, 2005 8:00 am
Secretary of State

05-31-2005 90001 033 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

66022537

05172005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000105135

1. Entity Name
BUENO'S LANDSCAPING CORPORATION

Principal Place of Business	Mailing Address
5401 SW 112TH CT. MIAMI, FL 33165	5401 SW 112TH CT. MIAMI, FL 33165

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: 20-1372927 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUENO, MONICA
5401 SW 112TH CT.
MIAMI, FL 33165

7. Name and Address of New Registered Agent

Name: DOMINGO BUENO
Street Address (P.O. Box Number is Not Acceptable): 5401 SW 112 TH CT
City: MIAMI FL Zip Code: 33165

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: Domingo Bueno — 5/25/2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BUENO, MONICA 5401 SW 112TH CT. MIAMI, FL 33165	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DOMINGO BUENO 5401 SW 112 TH. CT. MIAMI, FL 33165	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE: Domingo D Bueno — 5/25/2005 — (786) 200-3783
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / Date / Daytime Phone #