

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109944

FILED
Apr 25, 2008
Secretary of State

Entity Name: BEAUTIFUL MARY'S LAWN SERVICE, INC.

Current Principal Place of Business:

465 ROBIN HOOD CIR #102
NAPLES, FL 34104

New Principal Place of Business:

445 ROBIN HOOD CIR # 202
NAPLES, FL 34104

Current Mailing Address:

465 ROBIN HOOD CIR.# 102
NAPLES, FL 34104

New Mailing Address:

445 ROBIN HOOD CIR # 202
NAPLES, FL 34104

FEI Number: 20-1407651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRION, MANUEL I
465 ROBIN HOOD CIR. # 102
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

CARRION, MANUEL I
445 ROBIN HOOD CIR # 202
NAPLES, FL 34104 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: MANUEL CARRION

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARRION, MANUEL I
Address: 465 ROBIN HOOD CIR. APT. 102
City-St-Zip: NAPLES, FL 34104 US

Title: VP () Delete
Name: CARRION, RODRIGO G
Address: 465 ROBIN HOOD CIR APT. 102
City-St-Zip: NAPLES, FL 34104 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARRION, MANUEL I
Address: 445 ROBIN HOOD CIR # 202
City-St-Zip: NAPLES, FL 34104 US

Title: VP (X) Change () Addition
Name: CARRION, RODRIGO G
Address: 445 ROBIN HOOD CIR # 202
City-St-Zip: NAPLES, FL 34104 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MANUEL CARRION

P

04/25/2008

Electronic Signature of Signing Officer or Director

Date