

2005 FOR PROFIT CORPORATION ANNUAL REPORT

5/2/2005-90506-010-\$150.00-\$150.00

DOCUMENT # P04000114544 1. Entity Name DON OSCAR PLANTS AND TREES, INC.					
Principal Place of Business 8951 S.W. 21 ST. MIAMI, FL 33174			Mailing Address 8951 S.W. 21 ST. MIAMI, FL 33174		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 20-150 9020	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent TEJEDA, OSCAR A 8951 S.W. 21 ST. MIAMI, FL 33174					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PVST TEJEDA, OSCAR A 8951 S.W. 21 ST. MIAMI, FL 33174 ☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ 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 all other like empowered.					
SIGNATURE: <u><i>Don Oscar Tejeda</i></u> 3-27-05 305-536878 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, OFFICER OR DIRECTOR					

05 JUN 16 PM 4:45
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



06/30/2005 Chg-P CR2E034 (10/03)