2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # P04000165102 06-12-2006 90003 028 ***150.00 1. Entity Name PLANTS-N-YOUR PALM INC. Principal Place of Business Mailing Address 4000 7713 NW 60TH LANE 7713 NW 60TH LANE PARKLAND, FL 33067 PARKLAND, FL 33067 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05262006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 20-2608086 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MATSCHNER, BRITT Street Address (P.O. Box Number is Not Acceptable) 7713 NW 60TH LANE PARKLAND, FL- 33067 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** Signature, typed or printed name of registered agent and title if applicable (NQTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Added to Fees Due by September 6, 2006 __Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete ☐ Addition MATSCHNER, BRITT NAME 7713 NW 60TH LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PARKLAND, FL 33067 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Jun 12, 2006 8:00 am

ATTACHMENT 40095273



Division of Corporations

Annual Report

Annual Report Help 1

Document Number
P04000165102
Business Entity Name
PLANTS-N-YOUR PAEM INC.

☑ After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if filing after May 1st and notice was not received.

FEI Number

202608086

FEI Number Status

Listed Above : Applied For the Not Applicable

Certificate of Status Desired

· Yes 🥯 No - \$8.75 each

Election Campaign Financing Trust Fund Contribution : Yes (No.

Principal Place of Business.

Address

7713 NW 60TH LANE

Suite, Apt. #. etc.

City, State

PARKLAND

FL

Zip Code & Country 33067

Mailing Address

Address

7713 NW 60TH LANE

Suite, Apt. #. etc.

City, State

PARKLAND

FL

Zip Code & Country 33067

Name and Address of Registered Agent

Name (Last, First, Middle, Title)

MATSCHNER

BRITT

*- OR -

Business to serve as RA

Address (PO Box is not acceptable) 7713 NW 60TH LANE

Suite, Apt. #, etc.

City, State

PARKLAND

, FL

Zip Code & Country

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33067 US # PSY 600165102

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

Bud matschner

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title

Name (Last, First, Middle, Title)

MATSCHNER

BRITT

- OR -

Entity Name to serve as Officer/Director

Street Address

7713 NW 60TH LANE

City, State

PARKLAND

FL

Zip Code & Country

33067

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City. State

Division of Corporations

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Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

President

Officer/Director Signature But Watcher

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that