

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000040499

FILED
May 08, 2009
Secretary of State

Entity Name: ESTEBAN LAWNCARE SERVICES INC

Current Principal Place of Business:

6448 OLD MAIN ST
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

4116 WOODFIELD AVE
HOLIDAY, FL 34691 US

Current Mailing Address:

6448 OLD MAIN ST
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

4116 WOODFIELD AVE
HOLIDAY, FL 34691 US

FEI Number: 20-2522473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESCOBAR-CARRILLO, ESTEBAN
6448 OLD MAIN ST
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

ESCOBAR-CARRILLO, ESTEBAN
4116 WOODFIELD AVE
HOLIDAY, FL 34691 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: ESTEBAN ESCOBAR CARRILLO

05/08/2009

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: ESCOBAR CARRILLO, ESTEBAN
Address: 6448 OLD MAIN ST
City-St-Zip: NEW PORT RICHEY, FL 34653 US

Title: VD () Delete
Name: JUAREZ-SILVESTRE, REYNA
Address: 6448 OLD MAIN ST
City-St-Zip: NEW PORT RICHEY, FL 34653 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ESCOBAR CARRILLO, ESTEBAN
Address: 4116 WOODFIELD AVE
City-St-Zip: HOLIDAY, FL 34691 US

Title: VD (X) Change () Addition
Name: JUAREZ-SILVESTRE, REYNA
Address: 4116 WOODFIELD AVE
City-St-Zip: HOLIDAY, FL 34691 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: ESTEBAN ESCOBAR CARRILLO

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05/08/2009

Electronic Signature of Signing Officer or Director

Date