

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90313 001 *****8.75
04-16-2007 90313 002 ***150.00

DOCUMENT # P05000047564	
1. Entity Name ANGELITO LAWN SERVICE & MAINTENANCE, INC.	

Principal Place of Business 13516 S.W. 115TH COURT MIAMI, FL 33176	Mailing Address 13516 S.W. 115TH COURT MIAMI, FL 33176
--	--

2. Principal Place of Business - No P.O. Box # 13516 S.W. 115th Court	3. Mailing Address 13516 S.W. 115th Ct.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Miami, Fla.	City & State Miami, Fla.
Zip 33176	Zip 33176
Country U.S.A.	Country U.S.A.

04032007 Chg-P CR2E034 (12/06)

4. FEI Number 20-2710558	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent CINTRON, ANGEL 13516 S.W. 115TH COURT MIAMI, FL 33176	
---	--

7. Name and Address of New Registered Agent Name N/A 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 Angel Cintron DATE 4/12/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
--	--

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President	<input checked="" type="checkbox"/> Delete	TITLE CINTRON, ANGEL	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CINTRON, ANGEL		NAME	
STREET ADDRESS 13516 S.W. 115TH COURT		STREET ADDRESS	
CITY - ST - ZIP MIAMI, FL 33176		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: Angel Cintron <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE 4/12/07 DAYTIME PHONE (305) 235-0468