

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90173 006 ***150.00

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1. Entity Name

GOLDEN TREES LANDSCAPING CORP.



Principal Place of Business

18470 NW 22 ST
PEMBROKE PINES FL 33029

Mailing Address

18470 NW 22 ST
PEMBROKE PINES FL 33029



2. Principal Place of Business - No P.O. Box #

4508 Windmill Point Lane

3. Mailing Address

4508 Windmill Point Lane

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

1st MOORE

CR2E034 (10/06)

City & State

Jaxahatchee, Florida

City & State

Jaxahatchee, Florida

4. FEI Number

06-1744843

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GAUNTLETT, DOMINIQUE N
4508 Windmill Point Lane
Jaxahatchee, Florida 33470

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GAUNTLETT, DOMINIQUE N ☐ Delete
STREET ADDRESS 18470 NW 22 ST
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Gauntlett, Dominique N.
STREET ADDRESS 4508 Windmill Point Lane
CITY-ST-ZIP Jaxahatchee, Florida 33470

TITLE VD ☐ Change ☒ Addition
NAME Dominguez, Lizardo
STREET ADDRESS 4508 Windmill Point Lane
CITY-ST-ZIP Jaxahatchee, Florida 33470

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 19, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/07 561 333 5718

Date

Daytime Phone #