

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000052761

FILED  
Jun 29, 2010  
Secretary of State

**Entity Name:** SOLUTION LANDSCAPING & QUALITY INC

**Current Principal Place of Business:**

3186 WINDMILL POINT BLVD  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

**Current Mailing Address:**

3186 WINDMILL POINT BLVD  
KISSIMMEE, FL 34746

**New Mailing Address:**

PO BOX 581249  
KISSIMMEE, FL 34758

**FEI Number:** 41-2179693

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VILLAMIL, NANCY  
3501 W. VINE ST.  
SUITE 315  
KISSIMMEE, FL FL34741 US

**Name and Address of New Registered Agent:**

BERRIOS, SONIA  
3162 DASHA PALM DRIVE  
KISSIMMEE, FL FL34744 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: SONIA I BERRIOS

06/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: TORRES, LUIS  
Address: 3186 WINDMILL POINT BLVD  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: S  
Name: TORRES, JEFFREY  
Address: 3186 WINDMILL POINT BLVD  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP  
Name: TORRES, MARIA E  
Address: 3186 WINDMILL POINT BLVD  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: TR  
Name: TORRES, LUIS  
Address: 3186 WINDMILL POINT BLVD  
City-St-Zip: KISSIMMEE, FL 34746 US

I hereby 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 all other like empowered.

SIGNATURE: LUIS TORRES

PT

06/29/2010

Electronic Signature of Signing Officer or Director

Date