

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000070544

FILED  
May 25, 2006  
Secretary of State

Entity Name: SOUTH FLORIDA TREE WORKS, INC

## Current Principal Place of Business:

1591 SE PORT ST LUCIE BLVD SUITE A  
PT ST LUCIE, FL 34952

## New Principal Place of Business:

1591 SE PORT ST LUCIE BLVD SUITE C.  
PORT ST LUCIE, FL 34952

## Current Mailing Address:

1591 SE PORT ST LUCIE BLVD SUITE A  
PT ST LUCIE, FL 34952

## New Mailing Address:

1591 SE PORT ST LUCIE BLVD SUITE C.  
PORT ST LUCIE, FL 34952

FEI Number: 20-2831584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MECCA, DENNIS  
1210 MC FARLANE AVENUE  
PT ST LUCIE, FL 34952 US

## Name and Address of New Registered Agent:

MECCA, DENNIS  
1210 MC FARLANE AVENUE  
PORT ST LUCIE, FL 34952 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: DENNIS MECCA

05/25/2006

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: D. P ( ) Delete  
Name: MECCA, DENNIS  
Address: 1210 MC FARLANE AVENUE  
City-St-Zip: PT ST LUCIE, FL 34952

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D. P (X) Change ( ) Addition  
Name: MECCA, DENNIS  
Address: 1210 MC FARLANE AVENUE  
City-St-Zip: PORT ST LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify for the 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: DENNIS NECCA

D P

05/25/2006

Electronic Signature of Signing Officer or Director

Date