

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073174

FILED  
Jan 27, 2010  
Secretary of State

**Entity Name:** IT'S ALL ABOUT LANDSCAPING, INC.

**Current Principal Place of Business:**

4119 CAUSEWAY VISTA DR.  
TAMPA, FL 33615

**New Principal Place of Business:**

**Current Mailing Address:**

5951 MEMORIAL HWY #200  
TAMPA, FL 33615

**New Mailing Address:**

**FEI Number:** 20-2863262

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEVIN, COLLETTE  
4119 CAUSEWAY VISTA DR.  
TAMPA, FL 33615 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** VP  
**Name:** LEVIN, MARC  
**Address:** 8102 POND SHADOW LANE  
**City-St-Zip:** TAMPA, FL 33635

**Title:** VP  
**Name:** RIZO, CARLOS  
**Address:** 8595 BRIAR GROVE CIRCLE  
**City-St-Zip:** TAMPA, FL 33615

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:** COLLETTE LEVIN

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01/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date