

2008

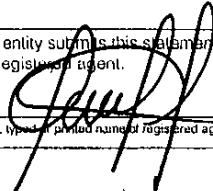
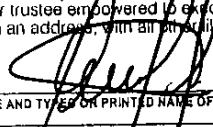
FOR PROFIT CORPORATION ANNUAL REPORT

APR 10/2

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR -7 AM 9:03



01172006 Chg-P CR2E034 (11/05)

DOCUMENT # POS000074801			
1. Entity Name Miami Nursery Corporation			
Principal Place of Business		Mailing Address	
2. Principal Place of Business 25555 SW 217 Ave Suite, Apt. #, etc.		3. Mailing Address 25555 SW 279 Ave Suite, Apt. #, etc.	
City & State Homestead, FL		City & State Homestead, FL	
Zip 33031	Country US	Zip 33031	Country US
4. FEI Number		☒ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
		Name Yovanis Fernandez	
		Street Address (P.O. Box Number is Not Acceptable) 25555 SW 217 Ave	
		City Homestead FL Zip Code 33031	
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 		DATE 4/1/08	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Fernandez, Yovanis 25555 SW 217 Ave Homestead, FL 33031 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100123855391 04/17/08--01012--011 **300.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	73 4/8/08 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT 07-08 ☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 an email address, or with a telephone number.			
SIGNATURE: 		Yovanis Fernandez 4/1/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

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MIAMI NURSERY CORPORATION
25555 SW 217 AVE
HOMESTEAD, FL 33031

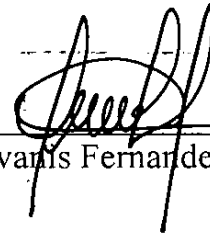
April 1, 2008

To Whom It May Concern:

This is a brief letter stating that I did not receive any postcard or notice Reminding me of the Uniform Business Report of my company Miami Nursery Corporation with Document # P05000074801. Along with this Business Report for the years of 2007-2008.

If you need further assistance please feel free to contact us. Thank you in advance for your help.

Sincerely,

A handwritten signature in black ink, appearing to read 'Yovannis Fernandez', is written over a horizontal line.

Yovannis Fernandez