2007 FOR PROFIT CORPORATION

Apr 02, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P05000080330 04-02-2007 90103 004 ***150.00 EXECUTIVE LANDSCAPING SERVICES, INC. Principal Place of Business Mailing Address 316 BUTTONWOOD LANE 316 BUTTONWOOD LANE 40047747 BOYNTON BEACH, FL 33426 **BOYNTON BEACH, FL 33426** 03082007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-2946268 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GLICK LAW FIRM, P.A. DO NOT WRITE 2255 GLADES ROAD SUITE 324-A IN THIS SPACE BOCA RATON, FL 33431 The above named epith submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of registered agent. Signature, typid or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE EDLING, ROGER S NAME STREET ADDRESS 316 BUTTONWOOD LANE CITY-ST-ZIP BOYNTON BEACH, FL 33426 TITLE NAME EDLING, ROGER S 316 BUTTONWOOD LANE STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33426 TITLE NAME EDLING, ROGER S STREET ADDRESS 316 BUTTONWOOD LANE DO NOT WRITE CITY-ST-ZIP BOYNTON BEACH, FL 33426 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE NAME STREET ADDRESS

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 wit

SIGNATURE:

CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR DIRECTOR

FILED