

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000092093

Entity Name: A1A SOD, SAND & SOIL INC

FILED
Mar 13, 2008
Secretary of State

Current Principal Place of Business:

28700 SW 157 AVE
HOMESTEAD, FL 33033

New Principal Place of Business:

28400 S. DIXIE HWY
HOMESTEAD, FL 33033

Current Mailing Address:

28700 SW 157 AVE
HOMESTEAD, FL 33033

New Mailing Address:

28400 S. DIXIE HWY
HOMESTEAD, FL 33033

FEI Number: 20-3079126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, YAMILE
11229 N.W. 88TH AVE
HIALEAH, FL 33010 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: PD () Delete
Name: DIAZ, YAMILE
Address: 11229 N.W. 88TH AVE
City-St-Zip: HIALEAH, FL 33010

Title: VD () Delete
Name: ORIA, ILEANA
Address: 8340 S.W. 102ND ST
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: ORIA, ISMAEL
Address: 8340 S.W. 102ND ST
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: DIAZ, ANDY
Address: 1304 SE 7 ST
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ISMAEL ORIA

D

03/13/2008

Electronic Signature of Signing Officer or Director

_____ Date