

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000125675

FILED  
May 01, 2009  
Secretary of State

Entity Name: WROMAS LAWN MAINTENANCE INC.

## Current Principal Place of Business:

10851 SW 154 STREET  
MIAMI, FL 33157 US

## New Principal Place of Business:

## Current Mailing Address:

10851 SW 154 STREET  
MIAMI, FL 33157 US

## New Mailing Address:

FEI Number: 20-3462918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

E-CONSULTING INCORPORATED  
16300 NE 19 AVENUE  
SUITE 215  
N MIAMI BEACH, FL 33162 US

## Name and Address of New Registered Agent:

E-CONSULTING INCORPORATED  
16499 NE 19 AVENUE  
SUITE 104  
N MIAMI BEACH, FL 33162 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: MICHAEL LAWRENCE

05/01/2009

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: P ( ) Delete  
Name: WROMAS, RODNEY  
Address: 10851 SW 154 STREET  
City-St-Zip: MIAMI, FL 33157 US

Title: VP ( ) Delete  
Name: WROMAS, RODNEY  
Address: 10851 SW 154 STREET  
City-St-Zip: MIAMI, FL 33157 US

Title: T ( ) Delete  
Name: WROMAS, RODNEY  
Address: 10851 SW 154 STREET  
City-St-Zip: MIAMI, FL 33157 US

Title: S ( ) Delete  
Name: WROMAS, RODNEY  
Address: 10851 SW 154 STREET  
City-St-Zip: MIAMI, FL 33157 US

## 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: MICHAEL LAWRENCE

RA

05/01/2009

Electronic Signature of Signing Officer or Director

Date