

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000151942

FILED
May 17, 2007
Secretary of State

Entity Name: J.T. FLORES LANDSCAPING & LAWN MAINTENANCE INC

Current Principal Place of Business:

17193 TRELIS ROAD
FORT MYERS, FL 33912

New Principal Place of Business:

17193 TRELIS ROAD
FORT MYERS, FL 33967

Current Mailing Address:

17193 TRELIS ROAD
FORT MYERS, FL 33912

New Mailing Address:

17193 TRELIS ROAD
FORT MYERS, FL 33967

FEI Number: 20-3832786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORES, MARIANA K
17193 TRELIS ROAD
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

FLORES, MARIANA K
17193 TRELIS ROAD
FORT MYERS, FL 33967 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:

05/17/2007

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: FLORES, TOMAS
Address: 17193 TRELIS ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Delete
Name: FLORES, MARIANA K
Address: 17193 TRELIS ROAD
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLORES, TOMAS
Address: 17193 TRELIS ROAD
City-St-Zip: FORT MYERS, FL 33967

Title: VP (X) Change () Addition
Name: FLORES, MARIANA K
Address: 17193 TRELIS ROAD
City-St-Zip: FORT MYERS, FL 33967

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: MARIANA K FLORES

VP

05/17/2007

Electronic Signature of Signing Officer or Director

Date