



**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P05000152180</b> 1. Entity Name <b>PAIZ LANDSCAPING &amp; MAINTENANCE, INC.</b>	
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Principal Place of Business <b>7255 S.W. 138TH AVE MIAMI, FL 33183-3135</b>	Mailing Address <b>7255 S.W. 138TH AVE MIAMI, FL 33183-3135</b>
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**DO NOT WRITE IN THIS SPACE**

	
04292007	No Chg-P CR2E034 (11/05)
4. FEI Number <b>54-2190520</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**PAIZ, RIGOBERTO  
7255 S.W. 138TH AVE  
MIAMI, FL 33183-3135**

**DO NOT WRITE IN THIS SPACE**

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: *[Signature]* *[Signature]* **04/25/2007**

Signature, typed or printed name of registered agent and title if applicable (NONE if registered agent's signature is drawn without listing) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$350.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P PAIZ, RIGOBERTO 7255 S.W. 138TH AVE MIAMI, FL 331833135</b>
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05/23/07-80040-013 150.00

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 a address with all other like empowered.

SIGNATURE: *[Signature]* **04/25/2007**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #