

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P05000157826**

1. Entity Name  
**FIVE STARS LANDSCAPING, INC.**



Principal Place of Business  
**1431 S.W. 93RD CT  
MIAMI, FL 33174**

Mailing Address  
**1431 S.W. 93RD CT  
MIAMI, FL 33174**

**FILED  
May 19, 2008 8:00 am  
Secretary of State**

05-19-2008 90029 018 \*\*\*163.75



**DO NOT WRITE IN THIS SPACE**

04202008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-3903723</b>	Applied For <input type="checkbox"/>
Not Applicable	

5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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**6. Name and Address of Current Registered Agent**

**NARANJO, OSVALDO  
1431 S.W. 93RD COURT  
MIAMI, FL 33174**

**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 typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	<b>NARANJO, OSVALDO</b>
STREET ADDRESS	<b>1431 S.W. 93RD COURT</b>
CITY-ST-ZIP	<b>MIAMI, FL 33174</b>

TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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IN THIS SPACE**

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 an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-20-08 (784)252-7458**

Date

Daytime Phone #