2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jun 12, 2006 8:00 am **Secretary of State DOCUMENT # P05000157905** 06-12-2006 90004 023 ***158.75 GREENHOUSE BUILDERS, INC., Mailing Address Principal Place of Business 1424 E MOWRY DR 1424 E MOWRY DR क त्रास्त्रक ने संबंधित 201 201 HOMESTEAD, FL 33033 HOMESTEAD, FL 33033 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06082006 CR2E034 (11/05) City & State 4. FEI Number Applied For City & State *2c*c - 0/29873 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name **BOLANOS, CARMENZA** Street Address (P.O. Box Number is Not Acceptable) 1424 E. MOWRY DR #201 HOMESTEAD, FL 33033 Zip Code City 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 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. corporation did not receive the prior notice. Due by September 6, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE □ Change ☐ Addition TITLE ☐ Delete **BOLANOS, CARMENZA** NAME NAME STREET ADDRESS STREET ADDRESS 1424 E. MOWRY DR #201 HOMESTEAD, FL 33033 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ۷P Delete ☐ Change TITLE BOLANOS, WILSON NAME NAME STREET ADDRESS STREET ADDRESS 1424 E. MOWRY DR #201 HOMESTEAD, FL 33033 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP Change ☐ Addition ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Defete TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-7IP

CITY - ST - ZIP

TITLE

NAME STREET ADDRESS

□ Delete

G OFFICER OR DIRECTOR

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

☐ Change

Addition

FILED

ATTACHMENT

40095328

SOUTHWEST ACCOUNTING CENTER, INC.

P.O. BOX 971577 Miami, Fl 33197-1577

Email Address: SWACCTG@fdn.com

305-255-7313

Phone: 305-255-2511 Fax:

June 08, 2006

Florida Dept of State Divisions of Corporations PO Box 6327 Tallahassee, Fl 32314

ATTENTION: Annual Reports Section

Re: Greenhouse Builders, Inc. #P05000157905

Gentlemen:

Please be advised that my client did not receive the notice to file her annual report. Attached is her check for \$158.75 and the reinstatement form.

Thank you in advance for your prompt attention in this matter.

Sincerely,

SOUTHWEST ACCOUNTING CENTER, INC.

Regina Lloret President

RLL/ls