

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165220

FILED
Jan 13, 2006
Secretary of State

Entity Name: ALL SEASONS LAWN & LANDSCAPE, INC.

Current Principal Place of Business:

3587 GENEVRA AVENUE
BOYNTON BEACH, FL 33436 US

New Principal Place of Business:

3584 GENEVRA AVENUE
BOYNTON BEACH, FL 33436 US

Current Mailing Address:

3587 GENEVRA AVENUE
BOYNTON BEACH, FL 33436 US

New Mailing Address:

3584 GENEVRA AVENUE
BOYNTON BEACH, FL 33436 US

FEI Number: 20-4055795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA CRUZ, IRENE
3587 GENEVRA AVENUE
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

DE LA CRUZ, IRENE
3584 GENEVRA AVENUE
BOYNTON BEACH, FL 33436 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: IRENE DE LA CRUZ

01/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVTS () Delete
Name: DE LA CRUZ, IRENE
Address: 3587 GENEVRA AVENUE
City-St-Zip: BOYTON BEACH, FL 33436 US

Title: D () Delete
Name: DE LA CRUZ, IRENE
Address: 3587 GENEVRA AVENUE
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTS (X) Change () Addition
Name: DE LA CRUZ, IRENE
Address: 3584 GENEVRA AVENUE
City-St-Zip: BOYTON BEACH, FL 33436 US

Title: D (X) Change () Addition
Name: DE LA CRUZ, IRENE
Address: 3584 GENEVRA AVENUE
City-St-Zip: BOYNTON BEACH, FL 33436 US

I hereby certify that the information supplied with this filing does not qualify for the 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: IRENE DE LA CRUZ

P

01/13/2006

Electronic Signature of Signing Officer or Director

Date