

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165220

FILED
Feb 21, 2009
Secretary of State

Entity Name: ALL SEASONS LAWN & LANDSCAPE, INC.

Current Principal Place of Business:

912 SE 4TH ST
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

217 SE 3RD STREET
UNIT A
BOYNTON BEACH, FL 33425 US

Current Mailing Address:

PO BOX 243196
BOYNTON BEACH, FL 33424 US

New Mailing Address:

P.O. BOX 243196
BOYNTON BEACH, FL 33424 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
912 SE 4TH ST
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

DE LA CRUZ, IRENE
217 SE 3RD STREET
UNIT A
BOYNTON BEACH, FL 33435 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

02/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVTS () Delete
Name: DE LA CRUZ, IRENE
Address: 912 SE 4TH ST
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: D () Delete
Name: DE LA CRUZ, IRENE
Address: 912 SE 4TH ST
City-St-Zip: BOYNTON BEACH, FL 33435 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTS (X) Change () Addition
Name: DE LA CRUZ, IRENE
Address: P.O. BOX 243196
City-St-Zip: BOYNTON BEACH, FL 33424 US

Title: D (X) Change () Addition
Name: DE LA CRUZ, IRENE
Address: P.O. BOX 243196
City-St-Zip: BOYNTON BEACH, FL 33424 US

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: IREN DE LA CRUZ

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02/21/2009

Electronic Signature of Signing Officer or Director

Date