2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005919

Entity Name: REDLAND QUALITY NURSERIES, CORP.

FILED Apr 27, 2007 Secretary of State

Current Princip	oal Place of Business:	New Princi	pal Place of Business

9100 SOUTH DADELAND BLVD 23100 SW 192 AVE 912 MIAMI, FL 33170

MIAMI, FL 33156

Current Mailing Address: New Mailing Address:

9100 SOUTH DADELAND BLVD 22950 SW 192 AVE 912 MIAMI, FL 33170

MIAMI, FL 33156

FEI Number: 20-4123984 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIEDRA, AURELIO A 9100 SOUTH DADELAND BLVD. 912 MIAMI, FL 33156 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:

Electronic Signature of Registered Agent Date

Electronic eignature or registered rig

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 OTERO, ANTONIO
 Name:
 OTERO, ANTONIO

 Address:
 780 NW 42 AVE
 Address:
 782 NW 42 AVE #538

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33126

 Name:
 RODRIGUEZ, MICHAEL
 Name:
 RODRIGUEZ, MICHAEL

 Address:
 780 NW 42 AVE
 Address:
 782 NW 42 AVE #538

 City-St-Zip:
 MIAMI, FL 331126
 City-St-Zip:
 MIAMI, FL 331126

Title: TREA () Delete Title: TREA (X) Change () Addition

 Name:
 RODRIGUEZ, MICHAEL
 Name:
 RODRIGUEZ, MICHAEL

 Address:
 780 NW 42 AVE
 Address:
 782 NW 42 AVE #538

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33126

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 OTERO, ANTONIO
 Name:
 OTERO, ANTONIO

 Address:
 780 NW 42 AVENUE
 Address:
 782 NW 42 AVENUE #538

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33126

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: ANTONIO OTERO P 04/27/2007