

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005919

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** REDLAND QUALITY NURSERIES, CORP.

**Current Principal Place of Business:**

23100 SW 192 AVE  
MIAMI, FL 33170

**New Principal Place of Business:**

**Current Mailing Address:**

22950 SW 192 AVE  
MIAMI, FL 33170

**New Mailing Address:**

**FEI Number:** 20-4123984

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OTERO, ANTONIO  
22950 SW 192 AVENUE  
MIAMI, FL 33170 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: OTERO, ANTONIO  
Address: 782 NW 42 AVE #538  
City-St-Zip: MIAMI, FL 33126

Title: VP  
Name: RODRIGUEZ, MICHAEL  
Address: 782 NW 42 AVE #538  
City-St-Zip: MIAMI, FL 331126

Title: TREA  
Name: RODRIGUEZ, MICHAEL  
Address: 782 NW 42 AVE #538  
City-St-Zip: MIAMI, FL 33126

Title: SEC  
Name: OTERO, ANTONIO  
Address: 782 NW 42 AVENUE #538  
City-St-Zip: MIAMI, FL 33126

I hereby 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 all other like empowered.

SIGNATURE: ANTONIO OTERO

PRES

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date