

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000080318

FILED
May 13, 2009
Secretary of State

Entity Name: JAVIER LAWNCARE, CORP

Current Principal Place of Business:

3327 STEEPLECHASE LANE
KISSIMMEE, FL 34746 US

New Principal Place of Business:

Current Mailing Address:

3327 STEEPLECHASE LANE
KISSIMMEE, FL 34746 US

New Mailing Address:

FEI Number: 20-0435930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUEVAS, JAVIER
3327 STEEPLECHASE LANE
KISSIMMEE, FL 34746 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CUEVAS, JAVIER
Address: 3327 STEEPLECHASE LANE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: LOPEZ, WARREN
Address: 610 CAMEL LANE
City-St-Zip: KISSIMMEE, FL 34759 US

Title: SEC () Change (X) Addition
Name: CHOCOY-AJCHE, SEBASTIAN
Address: 2004 POLO CLUB DR #103
City-St-Zip: KISSIMMEE, FL 34741 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: JAVIER CUEVAS

P

05/13/2009

Electronic Signature of Signing Officer or Director

_____ Date