2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P06000098265

Entity Name: E PLANT NURSERY, INC.

Current Principal Place of Business:

4301 AUTUMN LEAVES DRIVE
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

15210 AMBERLY DRIVE
APT. 825
TAMPA, FL 33647 US

New Mailing Address:

4301 AUTUMN LEAVES DRIVE
TAMPA, FL 33624 US

FEI Number: 20-5270396 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SERINO, LESLIE G
3415 WEST CYPRESS STREET
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

CHRISTIAN, DIAZ
311 HICKORY LN.
SEFFNER, FL 33584 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: CHRISTIAN DIAZ 04/30/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DIAZ, CHRISTIAN
Address: 15210 AMBERLY DRIVE, APT 825
City-St-Zip: TAMPA, FL 33647 US

Title: VP ( ) Delete
Name: DIAZ, CRISTINA I
Address: 15210 AMBERLY DRIVE, APT 825
City-St-Zip: TAMPA, FL 33647 US

Title: TREA (X) Delete
Name: DIAZ, LEONARD J
Address: 4301 AUTUMN LEAVES DRIVE
City-St-Zip: TAMPA, FL 33624 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DIAZ, CHRISTIAN
Address: 311 HICKORY LN.
City-St-Zip: SEFFNER, FL 33584 US

Title: VP (X) Change ( ) Addition
Name: DIAZ, CRISTINA I
Address: 311 HICKORY LN.
City-St-Zip: SEFFNER, FL 33584 US

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

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: CHRISTIAN DIAZ P 04/30/2008
Electronic Signature of Signing Officer or Director Date