

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000126735

Entity Name: RONNY NURSERY INC

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

4701 SW 188 AV
SOUTH WEST RANCHES, FL 33332 US

New Principal Place of Business:

Current Mailing Address:

4701 SW 188 AV
SOUTH WEST RANCHES, FL 33332 US

New Mailing Address:

FEI Number: 20-5859387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, IDALMIS
4701 SW 188 AV
SOUTH WEST RANCHES, FL 33332 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: P,SE () Delete
Name: LOPEZ, IDALMIS
Address: 4701 SW 188 AV
City-St-Zip: SOUTH WEST RANCHES, FL 33332 US

Title: VP () Delete
Name: LOPEZ, IDALMIS
Address: 4701 SW 188 AV
City-St-Zip: SOUTH WEST RANCHES, FL 33332 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: IDALMIS LOPEZ

P,SE

04/23/2007

Electronic Signature of Signing Officer or Director

Date