2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000022181

Entity Name: J & A PLANTS, INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	RY FORD RD. D, FL 32822			
Current Mailing Address:		New Mailing Address:		
	RY FORD RD. D, FL 32822			
FEI Number	: 20-8466052 FEI Number	Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Current Regis	stered Agent:	Name and Address	of New Registered Agent:
The above	FAY AVE. D, FL 32828 US e named entity submits this s	tatement for the p	ourpose of changing its registere	ed office or registered agent, or both,
in the State	e of Florida.	·		
SIGNATUI				
	Electronic Signature	of Registered Ag	ent	Date
Election Car	mpaign Financing Trust Fund Co	ontribution ().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P () Delete SEVILLA, AIDA 13319 TANJA KING BLVD. ORLANDO, FL 32828		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () Delete BERNARDO, SANDRA 10072 MARSH PINE CR. ORLANDO, FL 32832		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MG () Delete JACA, DANIEL 13319 TANJA KING BLVD. ORLANDO, FL 32828		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MG () Delete ALFONSO, VIVINA 482 BONIFAY AVE. ORLANDO, FL 32825		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	MG () Delete ALFONSO, JOSE 482 BONIFAY AVE.		Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: AIDA SEVILLA P 04/30/2009

ORLANDO, FL 32828

City-St-Zip: