

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000056898

Entity Name: L.D.L.M. LAWN SERVICE INC.

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

9410 WEST FLAGLER STREET  
APT # 313  
MIAMI, FL 33174

## **New Principal Place of Business:**

490 W 39 ST  
HIALEAH, FL 33012

## **Current Mailing Address:**

9410 WEST FLAGLER STREET  
APT # 313  
MIAMI, FL 33174

## **New Mailing Address:**

490 W 39 ST  
HIALEAH, FL 33012

FEI Number: 56-2659462

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARTINEZ, JUAN C MR.  
9410 WEST FLAGLER STREET  
APT # 313  
MIAMI, FL 33174 US

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

MARTINEZ, JUAN C MR.  
490 W 39 ST  
HIALEAH, FL 33012 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/12/2011

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: MARTINEZ, JUAN C MR.  
Address: 490 W 39 ST  
City-St-Zip: HIALEAH, FL 33012

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: JUAN C. MARTINEZ

P

04/12/2011

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

\_\_\_\_\_  
Date