

2008 FOR PROFIT CORPORATION ANNUAL REPORT

01-25-2008 90022 028 ***158.75
P07000058008

DOCUMENT # P07000058008	
1. Entity Name VERDE CAYMAN LANDSCAPING CORP.	



Principal Place of Business 11072 SW 65TH ST MIAMI, FL 33173	Mailing Address 11072 SW 65TH ST MIAMI, FL 33173
--	--

2. Principal Place of Business - No P.O. Box # 7845 W. 36 Ave Suite, Apt. #, etc. Unit # 201 City & State Hialeah, FL Zip 33018-7527 Country U.S.A	3. Mailing Address 7845 W 36 Ave Suite, Apt. #, etc. Unit # 201 City & State Hialeah, FL Zip 33018-7527 Country U.S.A
---	--

01192008 Chg-P CR2E034 (12/06)

4. FEI Number 26-0176973	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent OROZCO, ROGELIO 11072 SW 65TH ST MIAMI, FL 33173	
---	--

7. Name and Address of New Registered Agent Name Orozco, Rogelio Street Address (P.O. Box Number is Not Acceptable) 7845 W. 36 Ave Unit # 201 City Miami FL Zip Code 33018-7527	
---	--

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE	President Rogelio Orozco 1/19/08

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President OROZCO, ROGELIO 11072 SW 65TH ST MIAMI, FL 33173	TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Orozco, Rogelio 7845 W 36 Ave, Unit # 201 Hialeah, FL 33018-7527
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:	Rogelio Orozco 1/19/08 (786) 357-5304

FILED

08 FEB - 1 PM 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

