

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080363

FILED  
Jun 24, 2009  
Secretary of State

Entity Name: EMERGENCY LAWN SERVICES, INC.

## Current Principal Place of Business:

12413 S.W. 250 TERRACE  
MIAMI, FL 33032

## New Principal Place of Business:

## Current Mailing Address:

12413 S.W. 250 TERRACE  
MIAMI, FL 33032

## New Mailing Address:

FEI Number: 06-1821324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHOOS, SCOTT  
44 NE 16 STREET 16 STREET  
HOMESTEAD, FL 33030 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SALINAS, ROBERT  
Address: 16200 S.W. 282 STREET  
City-St-Zip: HOMESTEAD, FL 33033

Title: DVPS ( ) Delete  
Name: PASCHAL, FREDDIE  
Address: 12413 S.W. 250 TERRACE  
City-St-Zip: MIAMI, FL 33032

Title: T ( ) Delete  
Name: PASCHAL, FREDDIE  
Address: 12413 S.W. 250 TERRACE  
City-St-Zip: MIAMI, FL 33032

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: PASCHAL, FREDDIE  
Address: 12413 SW 250 TERR  
City-St-Zip: HOMESTEAD, FL 33032

Title: DVPS (X) Change ( ) Addition  
Name: SALINA, ROBERT  
Address: 16200 SW 282 STREET  
City-St-Zip: HOMESTEAD, FL 33033

Title: T (X) Change ( ) Addition  
Name: PASCHAL, JACQUELYN  
Address: 12413 S.W. 250 TERRACE  
City-St-Zip: MIAMI, FL 33032

Title: SEC ( ) Change (X) Addition  
Name: SALINAS, SANDRA  
Address: 16200 SW 282 ST  
City-St-Zip: HOMESTEAD, FL 33033

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: FREDDIE PASCHAL

DP

06/24/2009

Electronic Signature of Signing Officer or Director

Date