,2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 15, 2008 8:00 am Secretary of State DOCUMENT # P07000113437 03-26-2008 90028 013 ***158.75 JERONIMO S LAWN SERVICE AND LANDSCAPE CORP Principal Place of Business Mailing Address 5330 HARDEE ST 5330 HARDEE ST 66006667 NAPLES, FL 34113 US NAPLES, FL 34113 HS 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03232008 Chg-P CR2E034 (12/06) 4. FEI Number City & State City & State Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -----GALINDO, JERONIMO S Street Address (P.O. Box Number is Not Acceptable) 5330 HARDEE ST NAPLES, FL 34113 City 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 Deronimo SIGNATURE_ (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE TITLE ☐ Addition ☐ Change GALINDO, JERONIMO S 5330 HARDEE ST STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL 34113 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY ST. 7P TITLE Delete TITLE ☐ Change ☐ Addition MALES NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE MALKE MALIE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Oeleie TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete MILE IIILE ☐ Addition NAME MAKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.