

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000021975

**FILED**  
**Oct 19, 2009**  
**Secretary of State**

**Entity Name:** A & M LANDSCAPING AND LAWN SERVICES CORP

**Current Principal Place of Business:**

28 SOUTH O ST  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

28 OCEAN BREEZE  
LAKE WORTH, FL 33460

**Current Mailing Address:**

P O BOX 20305  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 26-1782953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OLMEDA, JOSE  
28 SOUTH O ST  
LAKE WORTH, FL 33460 US

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

OLMEDA, JOSE  
28 OCEAN BREEZE  
LAKE WORTH, FL 33460 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: JOSE OLMEDA

10/19/2009

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: P ( ) Delete  
Name: OLMEDA, JOSE SR  
Address: P O BOX 20305  
City-St-Zip: WEST PALM BEACH, FL 33416

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VICE ( ) Change (X) Addition  
Name: RUTH, OLMEDA  
Address: 28 OCEAN BREEZE  
City-St-Zip: LAKE WORTH, FL 33460

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: JOSE OLMEDA

SR

10/19/2009

Electronic Signature of Signing Officer or Director

Date