## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000056052

Entity Name: QUALITY OF LIFE LAWN MAINTENANCE INC.

FILED Jun 25, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
22315 SW MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
22315 SW MIAMI, FL					
FEI Number:	FE	I Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
JONES, CI 22315 SW MIAMI, FL					
	named entity subn e of Florida.	nits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic S	gnature of Registered Age	ent	Date	
		o), F.S., the corporation did no st Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Dele JONES, CLEVELANI 22315 SW 115 AVE. MIAMI, FL 33170		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	V (X) Dele SUMMERS, JUSTIN 11361 SW 227 S MIAMI, FL 33170		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: CLEVELAND S JONES **PRES** 06/25/2009