# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 25, 2008**
**Secretary of State**

DOCUMENT# P37274

**Entity Name:** AMERICAN FOLIAGE INTERNATIONAL, INC.

**Current Principal Place of Business:**

2624 JUNCTION RD
ZELLWOOD, FL 32798 US

**New Principal Place of Business:**

**Current Mailing Address:**

2624 JUNCTION RD
ZELLWOOD, FL 32798 US

**New Mailing Address:**

5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126 US

**FEI Number: 59-3101969** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

AMERICAN FOLIAGE INT'L
2624 JUNCTION ROAD
ZELLWOOD, FL 327985488 US

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

AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126 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: DOMINGO ALONSO 02/25/2008
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: CLAY, LANDON T
Address: 742 OLD DUBLIN ROAD
City-St-Zip: HANCOCK, NH

Title: D ( ) Delete
Name: CLAY, LAVINIA D
Address: 8880 NW 24 TERRACE
City-St-Zip: MIAMI, FL

Title: OM ( ) Delete
Name: SIMPSON, NANCY
Address: 2624 JUNCTION RD
City-St-Zip: APOPKA, FL 32712

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

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

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

Title: T (X) Change ( ) Addition
Name: ALONSO, DOMINGO
Address: 5805 BLUE LAGOON DR STE 200
City-St-Zip: MIAMI, FL 33126

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: LAVINIA D CLAY D 02/25/2008
Electronic Signature of Signing Officer or Director Date