

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000041230

FILED  
Feb 10, 2009  
Secretary of State

Entity Name: ALFREDO ALFONSO LANDSCAPING INC.

**Current Principal Place of Business:**

5065 EAST 9TH LANE  
HIALEAH, FL 33013

**New Principal Place of Business:**

**Current Mailing Address:**

5065 EAST 9TH LANE  
HIALEAH, FL 33013

**New Mailing Address:**

FEI Number: 65-0415878

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALFONSO, ALFREDO  
5065 ESAT 9TH LANE  
HIALEAH, FL 33013 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTV ( ) Delete  
Name: ALFONSO, ALFREDO  
Address: % 5065 EAST 9TH LANE  
City-St-Zip: HIALEAH, FL 33013

Title: D ( ) Delete  
Name: ALFONSO, ALFREDO  
Address: % 5065 EAST 9TH LANE  
City-St-Zip: HIALEAH, FL 33013

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

Title: PSTV (X) Change ( ) Addition  
Name: ALFONSO, ALFREDO  
Address: 5065 EAST 9TH LANE  
City-St-Zip: HIALEAH, FL 33013

Title: D (X) Change ( ) Addition  
Name: ALFONSO, ALFREDO  
Address: 5065 EAST 9TH LANE  
City-St-Zip: HIALEAH, FL 33013

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: ALFREDO ALFONSO

PSTV

02/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date