

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000084078

Entity Name: PLANT SOLUTIONS, INC

FILED  
Feb 04, 2011  
Secretary of State

**Current Principal Place of Business:**

7333 HYPOLUXO FARMS RD.  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

7333 HYPOLUXO FARMS RD.  
LAKE WORTH, FL 33463

**New Mailing Address:**

15901 SW 272ND STREET  
HOMESTEAD, FL 33031

FEI Number: 65-0453803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MARQUEZ, LIONEL  
7333 HYPOLUXO FARMS ROAD  
LAKE WORTH, FL 33463 US

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

MARQUEZ, LIONEL  
7333 HYPOLUXO FARMS  
LAKE WORTH, FL 33463 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: LIONEL M. MARQUEZ

02/04/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSDC  
Name: MARQUEZ, LIONEL  
Address: 7333 HYPOLUXO FARMS RD.  
City-St-Zip: LAKE WORTH, FL 33463

Title: T  
Name: MARQUEZ, LIONEL  
Address: 7333 HYPOLUXO FARMS RD.  
City-St-Zip: LAKE WORTH, FL 33463

Title: V  
Name: MARQUEZ, LIONEL  
Address: 7333 HYPOLUXO FARMS RD.  
City-St-Zip: LAKE WORTH, FL 33463

Title: S  
Name: MARQUEZ, MARGARET  
Address: 7333 HYPOLUXO FARMS ROAD  
City-St-Zip: LAKE WORTH, FL 33463

I hereby 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 all other like empowered.

SIGNATURE: LIONEL M. MARQUEZ

PRES

02/04/2011

Electronic Signature of Signing Officer or Director

Date