

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P94000001420

1. Entity Name  
ROSERIVER NURSERY & LANDSCAPING, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 OCT 28 PM 12:11

Principal Place of Business  
12500 SW 240 STREET  
PRINCETON, FL 33032 US

Mailing Address  
10505 SW 56 STREET  
MIAMI, FL 33165

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10202004

REIN-P

CR2E098 (6/04)

4. FEI Number  
59-3222773

Applied For  
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSARIO, CLAUDIO  
10505 SW 56 STREET  
MIAMI, FL 33165

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Claudio Rosario* CLAUDIO ROSARIO 10/26/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00  
After January 1, 2005, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME ROSARIO, CLAUDIO  
STREET ADDRESS 10505 SW 56 STREET  
CITY-ST-ZIP MIAMI, FL 33165

TITLE ☐ Change ☐ Addition  
NAME 700042280977  
STREET ADDRESS 10/28/04-01032--011 \*\*158.75  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME ROSARIO, MERCEDES  
STREET ADDRESS 10505 SW 56 ST  
CITY-ST-ZIP MIAMI, FL 33165

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Claudio Rosario* CLAUDIO ROSARIO 10/26/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/2

11/2

2/2

To: Florida Department of State  
Division of Corporations.

From: Claudio Rosario, President.  
Roseriver Nursery And Landscaping, Inc.  
Document # P94000001420  
FEI # 59-3222773

We, at Roseriver Nursery And Landscaping, Inc., did not received the documents from  
your office with which we can report the corporation.,,  
The same case did happened to another company I have.  
I want to ask you, please, to void the penalty.

Thank you.

Claudio Rosario

*Claudio Rosario 10/26/04*