## 2007 FOR PROFIT CORPORATION

## **ANNUAL REPORT** DOCUMENT # P94000022233 1. Entity Name PLANT S WORLD NURSERY & MAINTENANCE INC. Principal Place of Business Mailing Address 13681 SW 56 STREET

6. Name and Address of Current Registered Agent

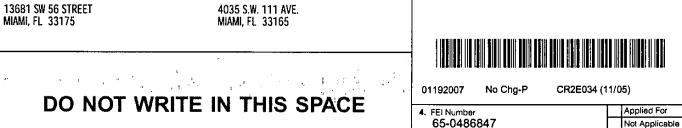
the obligations of registered agent.

**FILED** Jan 23, 2007 08:00 AM **Secretary of State** 

\$8.75 Additional

Fee Required

5. Certificate of Status Desired



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

SERRA, ALFREDO DO NOT WRITE 4035 S.W. 111 AVE. MIAMI, FL 33165 IN THIS SPACE

SIGNATURE  Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.				
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SERRA, ALFREDO 4035 SW 111TH AVE MIAMI, FL 33165			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000599710 01/25/07-80038-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				•
TITLE NAME STREET ADDRESS CITY-ST-ZIP			!	•
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.				