

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000038885

FILED
Apr 11, 2006
Secretary of State

Entity Name: RELIABLE LANDSCAPE SERVICES, INC.

Current Principal Place of Business:

1151 NW 89TH TERR.
PEMBROKE PINES, FL 33024

New Principal Place of Business:

P.O. BOX 4276
ENTERPRISE, FL 32725 US

Current Mailing Address:

1151 NW 89TH TERR
PEMBROKE PINES, FL 33024 US

New Mailing Address:

P.O. BOX 4276
ENTERPRISE, FL 32725 US

FEI Number: 65-0496736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIAMPA, RAY J
PARALEGAL SERVICES OF FLORIDA, INC.
4000 N STATE ROAD 7, SUITE 410
LAUDERDALE LAKES, FL 33319 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: PD () Delete
Name: ROMMERDAHL, SHAWN
Address: 1151 NW 89 TERR
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: ROMMERDAHL, KRISTIE
Address: 1151 NW 89TH TERR
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROMMERDAHL, SHAWN
Address: P.O. BOX 4276
City-St-Zip: ENTERPRISE, FL 32725

Title: D (X) Change () Addition
Name: ROMMERDAHL, KRISTIE
Address: P.O. BOX 4276
City-St-Zip: ENTERPRISE, FL 32725

I hereby certify that the information supplied with this filing does not qualify for the 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: SHAWN ROMMERDAHL

PD

04/11/2006

Electronic Signature of Signing Officer or Director

Date