2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: <

Apr 11, 2005 8:00 am Secretary of State DOCUMENT # P94000088943 04-11-2005 90172 038 ***150.00 1. Entity Name GARDINO NURSERY CORP. Mailing Address Principal Place of Business 9415 158RD SO PO BOX 83-2024 50035563 DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33483 U\$ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03272005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0538941 Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GARDINO, IRSIDES JR Street Address (P.O. Box Number is Not Acceptable) 7849 VENTURE CENTER WAY 6212 BOYNTON BEACH, FL 33437 Zip Code City FL 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PRESIDENT D K Addition TITLE ☐ Delete TITLE ☐ Change GARDINO, IRSIDES JR IRSIDES GARDINO JR. NAME NAME 7849 VENTURE CENTER WAY #6212 7849 VENTURE CENTER WAY #6212 STREET ADDRESS STREET ADDRESS BOYNTON BEACH, FL 33437 City-ST-ZIP CITY-ST-ZIP BOYNTON BEACH FLORIDA 33437 ☐ Delete TITLE VICE PRESIDENT Change **Addition** TITLE Reginal Cécilia Gardino NAME NAME STREET ADDRESS STREET ADDRESS 7849 VENTURE CENTER WAY #6212 CITY-ST-ZiP CITY+ST-7IP 33437 BOYNTON BEACH FLORIDA secretary ReginacceciliajeGadino K Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME 7849 VENTURE CENTER WAY #6212 STREET ADDRESS STREET ADDRESS BOYNTON BEACH FLORIDA 33437 CITY-ST-7IP CITY-ST-ZIP TREASURER Delete TITLE ☐ Change → 图 Addition TITLE IRSIDES GARDINO JR. NAME #6212 7849 VENTURE CENTER WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOYNTON BEACH FLORIDA 33437 Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 attachment with a plotters. With all other like empowered.

FILED