

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000068866

FILED
Apr 16, 2005
Secretary of State

Entity Name: KMH LAWN & LANDSCAPING SERVICE, INC.

Current Principal Place of Business:

11767 NW 48 STREET
CORAL SPRINGS, FL 33076 US

New Principal Place of Business:

Current Mailing Address:

11767 NW 48 STREET
CORAL SPRINGS, FL 33076 US

New Mailing Address:

FEI Number: 65-0605630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, KATHLEEN H
11767 NW 48 ST
CORAL SPRINGS, FL 33076 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: D () Delete
Name: ABRAHAM, KATHLEEN H
Address: 11767 NW 48 ST
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: ABRAHAM, JOHN M
Address: 11767 NW 48 STREET
City-St-Zip: CORAL SPRINGS, FL 33076 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ABRAHAM, JOHN M
Address: 11767 NW 48 ST
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D (X) Change () Addition
Name: ABRAHAM, KATHLEEN H
Address: 11767 NW 48 STREET
City-St-Zip: CORAL SPRINGS, FL 33076 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHLEEN H. ABRAHAM

D

04/16/2005

Electronic Signature of Signing Officer or Director

_____ Date