

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000078854

FILED
Aug 26, 2006
Secretary of State

Entity Name: NATUREZA VIVA NURSERY, INC.

Current Principal Place of Business:

25651 SW 154 AVE.
PRINCETON, FL 330326219

New Principal Place of Business:

Current Mailing Address:

25651 SW 154 AVE.
PRINCETON, FL 330326219

New Mailing Address:

FEI Number: 65-0625010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBIN, DEBRA M
25651 SW 154 AVE.
PRINCETON, FL 330326219 US

Name and Address of New Registered Agent:

NATALINO, LUZENIR G
25651 SW 154 AVE.
PRINCETON, FL 330326219 US

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: LUZENIR NATALINO

08/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: NATALINO, LUZENIR G
Address: 25651 SW 154 AVE.
City-St-Zip: PRINCETON, FL 330326219

Title: DVT () Delete
Name: NATALINO, RANDY
Address: 25651 SW 154 AVE.
City-St-Zip: PRINCETON, FL 330326219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LUZENIR NATALINO

OWNE

08/26/2006

Electronic Signature of Signing Officer or Director

Date