


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 24, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000094326  
 1. Entity Name  
 CAMARRA'S LANDSCAPE, INC.



Principal Place of Business      Mailing Address  
 2005 MARTIN RD                      1907 BRYAN RD  
 BRANDON, FL 33511 33              BRANDON, FL 33511

**DO NOT WRITE IN THIS SPACE**



01242005      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
 59-3373813              Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 MARRA, CURTIS A  
 1907 BRYAN RD  
 BRANDON, FL 33511

**DO NOT WRITE IN THIS SPACE**

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)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution       \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARRA, CURTIS A
STREET ADDRESS	2005 MARTIN RD
CITY ST ZIP	DOVER, FL 33527
TITLE	S
NAME	MARRA, ANTHONY
STREET ADDRESS	1907 BRYAN RD
CITY ST ZIP	BRANDON, FL 33511
TITLE	T
NAME	MARRA, STEPHANIE
STREET ADDRESS	2005 MARTIN RD
CITY ST ZIP	DOVER, FL 33527
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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 02/24/05-80034-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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.

SIGNATURE: Curtis A. Marra      2/20/05      8136572267  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #