## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000002394

Name:

Address:

City-St-Zip:

PRIETO, JOSE L

18023 SW 20TH STREET

MIRAMAR, FL 33029

Entity Name: JOSE LANDSCAPING & MAINTENANCE, CORP

FILED Apr 23, 2009 Secretary of State

Entity Name: JOSE LANDSCAPING & MAINTENANCE, CORP						
Current Principal Place of Business:				New Principal Place of Business:		
2805 EAST OAKLAND PARK BLVD #227 FT. LAUDERDALE, FL 33306			#192	1 PINES BLVD	22020	
Current Mailing Address:				PEMBROKE PINES, FL 33029  New Mailing Address:		
2805 EAST OAKLAND PARK BLVD #227 FT. LAUDERDALE, FL 33306				18331 PINES BLVD #192 PEMBROKE PINES, FL 33029		
FEI Number:	•	FEI Number Applied For()		ot Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
PRIETO, JOSE M 2805 EAST OAKLAND PARK BLVD #227 FT. LAUDERDALE, FL 33306 US The above named entity submits this statement for the purpose of				TO, JOSE M 1 PINES BLVD BROKE PINES, FL		
in the State		submits this statement for the j	ourpose or chan	ging its registered (	onice or registered agent, or both,	
SIGNATURE: JOSE M PRIETO				04/23/2009		
Electronic Signature of Registered Agent  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	PRIETO, JOSE 7929 NW 20TH		Title: Name: Addres City-Si	ss:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( PRIETO, MARI 18023 SW 201 MIRAMAR, FL	'H STREET	Title: Name: Addres City-St	ss:	) Change ( ) Addition	
Title:	Р (	) Delete	Title:	(	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARLA PRIETO VP 04/23/2009