

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000053684

FILED  
Jul 18, 2006  
Secretary of State

Entity Name: ROSE OF SHARON NURSERY INC.

## Current Principal Place of Business:

18470 SW 206TH ST  
MIAMI, FL 33187

## New Principal Place of Business:

## Current Mailing Address:

18470 SW 206TH ST  
MIAMI, FL 33187

## New Mailing Address:

FEI Number: 65-0670247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MISLOW, GREGORY J JR  
18470 SW 206TH ST  
MIAMI, FL 33187 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MISLOW, GREGORY J JR  
Address: 18470 SW 206TH ST  
City-St-Zip: MIAMI, FL 33187

Title: DST ( ) Delete  
Name: MISLOW, MARY LOU  
Address: 18470 SW 206TH ST  
City-St-Zip: MIAMI, FL

Title: DV ( ) Delete  
Name: MISLOW, GREGORY J III  
Address: 18805 SW 208TH ST  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARY LOU MISLOW

SEC

07/18/2006

Electronic Signature of Signing Officer or Director

Date