## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 13, 2006 08:00 AM Secretary of State

ANNOAL REPORT				Considerer of Chata	
DOCUMENT # P98000079278  1. Enlity Name A. HERNANDEZ LAWN MAINTENANCE, INC.				Se	cretary of State
2030 N.W. 1ST ST. 20		alling Address 1030 N.W. 1ST ST. 10YNTON BEACH, FL 33435	a a a a a a a a a a a a a a a a a a a	4 <b>48</b> 1/18 1 4/18 1 4/18 1 4/18 1 4/18 1 4/18 1 4/18 1 4/18 1	######################################
				01172006 No Chg	-P CR2E034 (11/05)
U	O NOT WRITE II	V THIS SPAC		FEI Number     65-0863256     Certificate of Status Dec	Applied For Not Applicable sired \$8.75 Additional Fee Required
	6. Name and Address of Current Regis	tered Agent	<del></del>	· · · · · · · · · · · · · · · · · · ·	
HERNANDEZ, ALEX 2030 N.W. 1ST ST. BOYNTON BEACH, FL 33435				DO NOT	
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					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signeture required when reinstating) OATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.				00 May Be ed to Fees	
10.	OFFICERS AND DIRE	CTORS			•
TITLE NAME STREET ADDRESS CITY-ST-ZIF	P HERNANDEZ, ALEX 2030 NW 1ST STREET BOYNTON BCH, FL 33435				0000463151 706-80064-008 150.00
ITILE NAME STREET ADDRESS CITY-ST-ZIP					-
TITCE MAME STREET ADDRESS CITY-57-ZPP			· · ·	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- ; · ; · ; · ; · ; · ; · ; · ; · ; · ;		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME		•	,		

12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under calls, 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:

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-06

Quytima Phone #