

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000102104

FILED
Apr 26, 2004
Secretary of State

Entity Name: NEW LOOK LAWN & LANDSCAPING SERVICE, INC.

Current Principal Place of Business:

607 SE 2ND AVE
CAPE CORAL, FL 33990

New Principal Place of Business:

4542 E. RIVERSIDE DR.
FORT MYERS, FL 33905

Current Mailing Address:

P.O. BOX 151322
CAPE CORAL, FL 33915

New Mailing Address:

P.O. BOX 51517
FORT MYERS, FL 33994

FEI Number: 65-0878491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, WILMA
607 SE 2ND AVE
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

GONZALEZ, WILMA
PO BOX 51517
FORT MYERS, FL 33994 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: WILMA GONZALEZ

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, WILMA
Address: 607 SE 2ND AVE
City-St-Zip: CAPE CORAL, FL 33990

Title: VPD () Delete
Name: GONZALEZ, SEBASTIAN
Address: 607 SE 2ND AVE
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GONZALEZ, WILMA
Address: PO BOX 51517
City-St-Zip: FORT MYERS, FL 33994

Title: VPD (X) Change () Addition
Name: GONZALEZ, SEBASTIAN
Address: PO BOX 51517
City-St-Zip: FORT MYERS, FL 33994

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILMA GONZALEZ

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date