
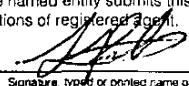
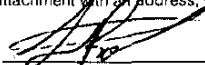


FILED  
Apr 24, 2006 8:00 am  
Secretary of State

04-24-2006 90366 029 \*\*\*150.00

2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # P99000039994			
1. Entity Name RUBIO LANDSCAPING CORPORATION			
Principal Place of Business 15400 SW 103RD COURT MIAMI, FL 33157		Mailing Address 15400 SW 103RD COURT MIAMI, FL 33157	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. 26185 SW 152 Ave		Suite, Apt. #, etc. FL 33032	
City & State HOMERON FL		City & State FL 33032	
Zip 33032		Country USA	
4. FEI Number 65-0363962		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		CR2E034 (11/05)	
6. Name and Address of Current Registered Agent RUBIO, JOSE A 15400 SW 103RD COURT MIAMI, FL 33157		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: 4-11-06 (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D RUBIO, JOSE A 15400 SW 103RD COURT MIAMI, FL 33157		TITLE NAME STREET ADDRESS CITY-ST-ZIP D. RUBIO 26185 SW 152 Ave	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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:  DATE: 4-11-06 Daytime Phone #: (305) 254-731			