

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V25936

FILED
Mar 18, 2009
Secretary of State

Entity Name: PERSICA LANDSCAPING CO., INC.

Current Principal Place of Business:

1703 BAUM RD
TALLAHASSEE, FL 32317 US

New Principal Place of Business:

Current Mailing Address:

1703 BAUM RD
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-3114984 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARIMIPOUR, GHOLAM REZA
1348 CONSERVANCY DR E
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

KARIMIPOUR, GHOLAM R MGR
1703 BAUM ROAD
TALLAHASSEE, FL 32317 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: GHOLAM R. KARIMIPOUR

03/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KARIMIPOUR, GHOLAM R, EZA
Address: 1703 BAUM RD
City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete
Name: MOGHADDAM, ASHRAF K,
Address: 1703 BAUM RD
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: GHOLAM R. KARIMIPOUR

MGR

03/18/2009

Electronic Signature of Signing Officer or Director

Date