

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000083554

Entity Name: MAYRA NURSERY, INC

Current Principal Place of Business:

19850 SW 392ND ST.
HOMESTEAD, FL 33034

Current Mailing Address:

PO BOX 343433
FLORIDA CITY, FL 33034

FEI Number: 65-1132136

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALBAN, LAZARO
19850 SW 392 ST
FLORIDA CITY, FL 33034 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name GALBAN, LAZARO
Address PO BOX 343433
City-State-Zip: FLORIDA CITY FL 33034

Title VP
Name MENDIZABAL, MAYRA
Address PO BOX 343433
City-State-Zip: FLORIDA CITY FL 33034

Title S
Name GALBAN, LAZARO JR
Address PO BOX 343433
City-State-Zip: FLORIDA CITY FL 33034

I hereby 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 all other like empowered.

SIGNATURE: LAZARO GALBAN

PRESIDENT

03/10/2014

Electronic Signature of Signing Officer/Director Detail

Date