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: JUAN GARCIA

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent: GARCIA, JUAN

GARCIA, JUAN 4225 20TH AVE SW NAPLES, FL 34116 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

### Officer/Director Detail :

Title	Р	Title	VP
Name	GARCIA, JUAN	Name	RAMIREZ, GERARDO
Address	4225 20TH AVE SW	Address	4225 20TH AVE SW
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116

# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P13000064048

Entity Name: P. GARCIA LANDSCAPING INC

#### **Current Principal Place of Business:**

2090 41ST ST SW APT A NAPLES, FL 34116

# **Current Mailing Address:**

2090 41ST ST SW APT A NAPLES, FL 34116

# FEI Number: NOT APPLICABLE

# PRESIDENT

04/30/2014 Date

# FILED Apr 30, 2014 Secretary of State CC8746760826

Certificate of Status Desired: No

Date