

PROPOSERS' CONFERENCE

LANDSCAPE MAINTENANCE SERVICES - DOMINGUEZ GAP SPREADING GROUNDS (2009-PA003)

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS

Tuesday, April 28, 2009, at 10:00 a.m. at Public Works Headquarters, 900 South Fremont Avenue, Alhambra, California 91803, in

Conference Room A

Please print clearly and leave your business card.

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
TC SERENA Company Name	Robert Anderson Attendee's Name	Mailing Address: 80-100 Ave 54 Gardena CA City: Gardena State: CA Zip: 92203 Telephone Number: (760) 275-7901 FAX: () E-Mail Address: RobAnderson@CPSCU.com
1040 Landscaping Company Name	Marcelino Mendez Attendee's Name	Mailing Address: City: Orange State: CA Zip: 92867 Telephone Number: (714) 633-6200 FAX: (714) 633-5033 E-Mail Address:
Ortega Landscapes Inc Co Company Name	Robert Cisneros Attendee's Name	Mailing Address: 1414 S. East End Ave City: Pomona State: CA Zip: 91766 Telephone Number: (909) 623-8287 FAX: (909) 689-0634 E-Mail Address: robert@ortegalandscape.com
Far East Landscape Maint Company Name	Tony Moon Attendee's Name	Mailing Address: PO Box 95035 City: Mission Hills State: CA Zip: 91395 Telephone Number: (818) 402-8411 FAX: (661) 297-6282 E-Mail Address: far-east-maint@yahoo.com
Trugreen Landscap Company Name	Areg Mquagen Attendee's Name	13500 135th St Mailing Address: Gilbert Torochan@landcare.com City: Gardena CA State: CA Zip: Telephone Number: (310) 719-1008 FAX: (310) 323-4067 E-Mail Address: gilberttorochan@landcare.com

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
S.C. Yamamoto Inc. Company Name	Cole L. Arakaki Attendee's Name	Mailing Address: 2031 Emery Ave City: LA Habra State: CA Zip: 90631 Telephone Number: (562) 690-3988 FAX: () E-Mail Address: SCYJunior@AOL.com
United Pacific Services Company Name	Leo Ramirez Attendee's Name	Mailing Address: 120 E. LA HABRA Blvd. Suite 107 City: LA HABRA State: CA Zip: 90631 Telephone Number: (562) 691-4600 FAX: (562) 691-8839 E-Mail Address: GUS@unitedpac.com
MIDORI GARDENS INC Company Name	FRANCISCO SANCHEZ Attendee's Name	Mailing Address: 3231 S. MAIN ST. City: SANTA ANA State: CA Zip: 92707 Telephone Number: 714, 7518792 FAX: 714, 7514167 E-Mail Address: MIDORISCAPE@SBCGLOBAL.net
Sue Scapes Landscape Company Name	Sue Clarke-Pres Attendee's Name	Mailing Address: 1529 W. 13th St. # D City: UPLAND State: CA Zip: 91784 Telephone Number: 909, 982, 0325 FAX: 909, 982, 0394 E-Mail Address: SWSCAPES70@AOL.COM
Certified Tree Care Company Name	Joe Navarro Attendee's Name	Mailing Address: 2298 N. Batavia St City: Orange State: CA Zip: 92865 Telephone Number: 714, 279-8119 FAX: 714, 279-8113 E-Mail Address: jchandler@earthlink.net

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SERCO LANDSCAPE Company Name Name of Parent Company (if Applicable)	JOSÉ CARDENAS Attendee's Name Title	Mailing Address: City: State: Zip: Telephone Number: (310) 994-7245 FAX: () E-Mail Address: (310) 345-7245
WYRZEL LANDSCAPE Company Name Name of Parent Company (if Applicable)	MARGARET WYRZEL Attendee's Name Title	Mailing Address: 3214 OAKDALE RD City: STUDIO CITY State: CA Zip: 91604 Telephone Number: (818) 762-8653 FAX: (818) 769-9038 E-Mail Address: WYRZELAN@AOL.COM
KENTON LOPP Company Name Name of Parent Company (if Applicable)	DONCH WAKATA Attendee's Name Title	Mailing Address: 1360 SUNBURSE DR City: MONTEREY PARK State: CA Zip: 91754 Telephone Number: (323) 269-7759 FAX: (323) 266-6333 E-Mail Address:
BENNETT LANDSCAPE Company Name Name of Parent Company (if Applicable)	AZOR O. GONZALEZ Attendee's Name Title	Mailing Address: 25889 BELL & PORTE AV. City: HARBOR CITY State: CA Zip: 90710 Telephone Number: (310) 534-3543 FAX: (310) 534-3176 E-Mail Address: BENNETT LANDSCAPE @ CON. NET
DENKIDRIDGE LANDSCAPE Company Name Name of Parent Company (if Applicable)	BRIGGS PEUL Attendee's Name Title	Mailing Address: 8618 HASKELL AVE City: NORTH HILLS State: CA Zip: 91343 Telephone Number: (818) 891-0468 FAX: (818) 892-9273 E-Mail Address: briggs@coalescencelandscape.net

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<u>Torres Landscape Service</u> Company Name	<u>Rudy Torres</u> Attendee's Name	Mailing Address: <u>9933 Lev ave.</u> City: <u>Arlington</u> State: <u>CA</u> Zip: <u>91331</u> Telephone Number: <u>(626) 422-0861</u> FAX: <u>(626) 359-0309</u> E-Mail Address: <u>Torres Landscape - 5@msn.com</u>
<u>QUALITY SPRAYERS INC</u> Company Name	<u>RICHARD ELSASS</u> Attendee's Name	Mailing Address: <u>1549 W 17th ST</u> City: <u>LONG BEACH</u> State: <u>CA</u> Zip: <u>90813</u> Telephone Number: <u>(562) 437-1033</u> FAX: <u>(562) 435-5767</u> E-Mail Address: <u>QSWEEED@AOL.COM</u>
<u>TROPICAL CREATIONS INC</u> Company Name	<u>HECTOR HERMOSILLO</u> Attendee's Name	Mailing Address: <u>18555 EDDY ST.</u> City: <u>NORTHRIDGE</u> State: <u>CA</u> Zip: <u>91324</u> Telephone Number: <u>(818) 885-5000</u> FAX: <u>(818) 885-5554</u> E-Mail Address: <u>hector@tropicalcreations.com</u>
<u>P.L.S.</u> Company Name	<u>Ignacio Macias</u> Attendee's Name	Mailing Address: <u>1909 Wilshire Blvd.</u> City: <u>Los Angeles</u> State: <u>CA</u> Zip: <u>90057</u> Telephone Number: <u>(213) 386-2552</u> FAX: <u>(213) 386-2546</u> E-Mail Address: <u>ibms@pacbell-net</u>
<u>Premier Landscaping Svc</u> Company Name	<u>Division Manager</u> Title	Mailing Address: <u>15529 ARROW HWY</u> City: <u>IRVINDALE</u> State: <u>CA</u> Zip: <u>91706</u> Telephone Number: <u>(909) 960-0196</u> FAX: <u>(909) 960-3809</u> E-Mail Address: <u>joshtta@mariposa-ca.com</u>
<u>MARIPOSA</u> Company Name	<u>JOSHUA CHO</u> Attendee's Name	Mailing Address: <u>15529 ARROW HWY</u> City: <u>IRVINDALE</u> State: <u>CA</u> Zip: <u>91706</u> Telephone Number: <u>(909) 960-0196</u> FAX: <u>(909) 960-3809</u> E-Mail Address: <u>joshtta@mariposa-ca.com</u>

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<u>Service-Scape</u> Company Name _____ Name of Parent Company (if Applicable)	<u>de Torregano</u> Attendee's Name <u>owner</u> Title	Mailing Address: <u>9716 Cottonwood Way</u> City: <u>Alta Loma</u> State: <u>Ca.</u> Zip: <u>91737</u> Telephone Number: <u>(951) 545-1125</u> FAX: <u>(909) 466-7921</u> E-Mail Address: _____
<u>DMF Contracting</u> Company Name _____ Name of Parent Company (if Applicable)	<u>Nancy Ramirez</u> Attendee's Name <u>Bus. Dev.</u> Title	Mailing Address: <u>3000 E. Colorado</u> City: <u>Anaheim</u> State: <u>CA</u> Zip: <u>92806</u> Telephone Number: <u>714 630-9470</u> FAX: <u>714 630-9475</u> E-Mail Address: <u>nramirez@dmfcontracting.com</u>
<u>Poiena Landscape, Inc.</u> Company Name <u>JOSE SALCEDO</u> Company Name _____ Name of Parent Company (if Applicable)	<u>JOSE SALCEDO JR</u> Attendee's Name <u>OPERATIONS MGR.</u> Title	Mailing Address: <u>732 N. Diamond Bar Blvd.</u> City: <u>Diamond Bar</u> State: <u>CA</u> Zip: <u>91765</u> Telephone Number: <u>(909) 860-3277</u> FAX: <u>(909) 860-2280</u> E-Mail Address: <u>jsalcedo@poienalandscape.com</u>
_____ Company Name _____ Name of Parent Company (if Applicable)	_____ Attendee's Name _____ Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () () () FAX: () () () E-Mail Address: _____
_____ Company Name _____ Name of Parent Company (if Applicable)	_____ Attendee's Name _____ Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () () () FAX: () () () E-Mail Address: _____
_____ Company Name _____ Name of Parent Company (if Applicable)	_____ Attendee's Name _____ Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () () () FAX: () () () E-Mail Address: _____

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Sign-In Sheet for Walk-Through

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>Grass Landscape & more</u> Company Name Name of Parent Company (if Applicable)	<u>Robert Lopez</u> Attendee's Name <u>Sales</u> Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>Service - Scape</u> Company Name Name of Parent Company (if Applicable)	<u>Joe Tarregano</u> Attendee's Name _____ Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>TESERA</u> Company Name Name of Parent Company (if Applicable)	<u>Ros Arce</u> Attendee's Name _____ Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>United Public Services</u> Company Name Name of Parent Company (if Applicable)	<u>Leo Ramirez</u> Attendee's Name _____ Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>Certified Tree Care</u> Company Name Name of Parent Company (if Applicable)	<u>Joe Navarro</u> Attendee's Name _____ Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>Dominguez Landscape</u> Company Name	<u>Brian Park</u> Attendee's Name	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>MARIPOSA</u> Company Name	<u>ESHERA CHAO</u> Attendee's Name	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>SUN-SCAPES</u> Company Name	<u>Scott CLARK</u> Attendee's Name	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>Torres Landscape</u> Company Name	<u>Ruby torres</u> Attendee's Name	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____
<u>Bennett Landscape</u> Company Name	<u>Alex O. Gonzalez</u> Attendee's Name	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: (____) _____ FAX: (____) _____ E-Mail Address: _____

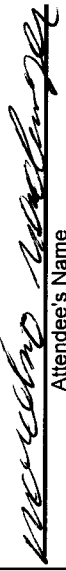
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<u>Far East Landscape</u> Company Name Name of Parent Company (if Applicable)	<u>Tony Moon</u> Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: <u>(818) 402-8411</u> FAX: () E-Mail Address: _____
<u>Frogreen Landscape</u> Company Name Name of Parent Company (if Applicable)	<u>Gilberto Rocha</u> Attendee's Name <u>Area Manager</u> Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: <u>gilbertrocha@landcare.com</u>
<u>S.C. Yamamoto, Inc.</u> Company Name Name of Parent Company (if Applicable)	<u>Cole L. Arakaki</u> Attendee's Name <u>Rick Adams</u> Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____
<u>MIDORI GARDENS INC</u> Company Name Name of Parent Company (if Applicable)	<u>FRANCISCO SANCHEZ</u> Attendee's Name <u>SUPERVISOR</u> Title	Mailing Address: <u>3231 S.</u> City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____
<u>SEPCO LANDSCAPE</u> Company Name Name of Parent Company (if Applicable)	<u>JOSE CARRETERO</u> Attendee's Name Title	Mailing Address: <u>(310) 994-7245</u> City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>4040 Landscaping Inc</u> Company Name Name of Parent Company (if Applicable)	<u></u> Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
<u>Premier Landscaping Services</u> Company Name <u>Premier Bldg. Maint. Svs.</u> Name of Parent Company (if Applicable)	<u></u> Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
 Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
 Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
 Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____

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<u>Wapzel Landscape</u> Company Name Name of Parent Company (if Applicable)	<u>Marc Wapzel</u> Attendee's Name Title	Mailing Address: <u>3214 Oak Dell Rd</u> City: <u>Studio City</u> State: <u>CA</u> Zip: <u>91624</u> Telephone Number: <u>(818) 762 8653</u> FAX: <u>(818) 769 9038</u> E-Mail Address: <u>Wapzel@AOL.com</u>
<u>DMA Contracting Inc</u> Company Name Name of Parent Company (if Applicable)	<u>Nancy Ramirez</u> Attendee's Name <u>Bus. Dev</u> Title	Mailing Address: <u>3000 E. Coronado</u> City: <u>Anaheim</u> State: <u>CA</u> Zip: <u>92806</u> Telephone Number: <u>(714) 630-9476</u> FAX: <u>(714) 630-9471</u> E-Mail Address: <u>Nramirez@DMAContracting.com</u>
<u>Porema Landscape, Inc.</u> Company Name Name of Parent Company (if Applicable)	<u>Jose Saucedo Jr</u> Attendee's Name <u>OPERATION MGR</u> Title	Mailing Address: <u>732. N. DIRMUNO BAY BLVD</u> City: <u>DANA POINT</u> State: <u>CA</u> Zip: <u>91765</u> Telephone Number: <u>(949) 860-3277</u> FAX: <u>(949) 860-3280</u> E-Mail Address: <u>jsaucedo@porema-landscape.com</u>
<u>TROPICAN CREATIONS INC.</u> Company Name Name of Parent Company (if Applicable)	<u>HECTOR HERMOSILLO</u> Attendee's Name <u>CHIEF ESTIMATOR</u> Title	Mailing Address: <u>18555 EDDY ST.</u> City: <u>NORTHRIDGE</u> State: <u>CA</u> Zip: <u>91324</u> Telephone Number: <u>(818) 805-5000</u> FAX: <u>(818) 805-5554</u> E-Mail Address: <u>hector@tropicalcreations.com</u>
 Company Name Name of Parent Company (if Applicable)	 Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () () () FAX: () () () E-Mail Address: _____