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FILED
Jun 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 235005
 1. Corporation Name
PASADENA GARDENS INC

Principal Place of Business: **600 LAYNE BLVD #110 HALLANDALE, FL 33009 US**
 Mailing Address: **600 LAYNE BLVD HALLANDALE, FL 33009-6506 US**

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	04/01/1960	05/01/1996
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	27	59-093/668	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28	<input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
24	29	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Country	Country		
25	30		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
DEVITA, SEBASTIAN 600 LAYNE BLVD APT 117 HALLANDALE FL 33009		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL
		85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NOVAK, VICTOR	12 NAME	
STREET ADDRESS	600 LAYNE BLVD	13 STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE FL 33009	14 CITY-ST-ZIP	
TITLE	D V	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELLI, ANTHONY	22 NAME	
STREET ADDRESS	600 LAYNE BLVD	23 STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE FL 33009	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VERDONE, ANGELO	32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	D	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VERDONE, ANGELO	42 NAME	
STREET ADDRESS	600 LAYNE BLVD	43 STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE FL 33009	44 CITY-ST-ZIP	
TITLE	D T	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LA PRAIRIE, ROBERT	52 NAME	300002216273
STREET ADDRESS	600 LAYNE BLVD	53 STREET ADDRESS	-06/18/97--01094--026
CITY-ST-ZIP	HALLANDALE FL 33009	54 CITY-ST-ZIP	***165.00
TITLE	D S	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	McKENNEY	62 NAME	05
STREET ADDRESS	600 LAYNE BLVD	63 STREET ADDRESS	611747
CITY-ST-ZIP	HALLANDALE FL 33009	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ROBERT LA PRAIRIE TREAS *Robert LaPraille* x6-11-97 454 4564324
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

CR2E034 (9/96)