

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726688

FILED  
Mar 21, 2005  
Secretary of State

Entity Name: PALM-EAST GARDENS INC.

**Current Principal Place of Business:**

1850 W 56 ST  
AT OFFICE  
HIALEAH, FL 330127363 US

**New Principal Place of Business:**

**Current Mailing Address:**

1850 W 56 ST  
AT OFFICE  
HIALEAH, FL 33012 US

**New Mailing Address:**

FEI Number: 59-1504883      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
WATER FORD CENTER PARK-5201 BLUE  
LAGOON DR, STE 1000, AT. ROSA DE LA CAMARA  
MIAMI, FL 33126 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PDP ( ) Delete  
Name: GILBERTO, ALONSO  
Address: 1810 W 56 ST  
City-St-Zip: HIALEAH, FL 33012

Title: TDT ( ) Delete  
Name: RUIZ, GEORGINA  
Address: 1810 W. 56 ST.  
City-St-Zip: HIALEAH, FL

Title: SDS ( ) Delete  
Name: RUIZ, BERNARDO  
Address: 1850 W. 56ST  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GILBERTO ALONSO

P

03/21/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date