

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 10:58

DOCUMENT # K91102 (9)

POINCIANA GARDENS, INC.

DO NOT WRITE IN THIS SPACE.

1. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
11921 S. DIXIE HWY SUITE 202 MIAMI FL 33156		11921 S. DIXIE HWY SUITE 202 MIAMI FL 33156		05/26/1989	04/26/1994
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For		
21	26	65-0168494	Not Applicable		
22	27	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required		
23	28	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees		
24	25	29	30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PRICE, IRA 9130 S. DADELAND BLVD 2 DATRAN CENTRE, SUITE 1705 MIAMI FL 33156				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3	City		
				B4	FL	B5	Zip Code

11. Pursuant to the provisions of Sections 607.0509 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME	D MARLIN, KENNETH	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 STREET ADDRESS	11921 S. DIXIE HWY 202	12 NAME	
12.3 CITY, ST, ZIP	MIAMI FL	13 STREET ADDRESS	
12.4 OFFICE	DP	14 CITY, ST, ZIP	
12.5 NAME	GIOVANNETTI, PAUL	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 STREET ADDRESS	13870 S.W. 74TH ST.	22 NAME	
12.7 CITY, ST, ZIP	MIAMI FL	23 STREET ADDRESS	
12.8 OFFICE		24 CITY, ST, ZIP	
12.9 NAME		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 STREET ADDRESS		32 NAME	
12.11 CITY, ST, ZIP		33 STREET ADDRESS	
12.12 OFFICE		34 CITY, ST, ZIP	
12.13 NAME		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.14 STREET ADDRESS		42 NAME	
12.15 CITY, ST, ZIP		43 STREET ADDRESS	
12.16 OFFICE		44 CITY, ST, ZIP	
12.17 NAME		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.18 STREET ADDRESS		52 NAME	
12.19 CITY, ST, ZIP		53 STREET ADDRESS	
12.20 OFFICE		54 CITY, ST, ZIP	
12.21 NAME		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.22 STREET ADDRESS		62 NAME	
12.23 CITY, ST, ZIP		63 STREET ADDRESS	
12.24 OFFICE		64 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 as an attachment with an address.

SIGNATURE: _____ DATE: _____