

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 12, 2004 8:00 am**  
**Secretary of State**

07-12-2004 90012 046 \*\*\*550.00

**DOCUMENT # P97000105655**

1. Entity Name  
**GABLES DESIGN CENTRE PROPERTIES, INC.**



Principal Place of Business  
**4119 PONCE DE LEON BLVD  
CORAL GABLES, FL 33146**

Mailing Address  
**4119 PONCE DE LEON BLVD  
CORAL GABLES, FL 33146**

2. Principal Place of Business

3. Mailing Address

**10425 SW 79th Place**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**Miami, FL**

Zip

Country

Zip

**33156**

Country

**USA**

07082004

Chg-P

CR2E034 (10/03)

4. FEI Number

**65-0801122**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**QUESADA, G F  
1313 PONCE DE LEON BLVD.  
SUITE 200  
CORAL GABLES, FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing,  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **RODRIGUEZ, JOSE A**  
STREET ADDRESS **9502 SW 123 STREET**  
CITY- ST- ZIP **MIAMI, FL 33186**

TITLE **VP** ☐ Delete  
NAME **RODRIGUEZ, REMBERTO S**  
STREET ADDRESS **10425 SW 79TH PL**  
CITY- ST- ZIP **MIAMI, FL 33156**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition  
NAME **Rodriguez, Jose A.**  
STREET ADDRESS **10425 SW 79th Place**  
CITY- ST- ZIP **Miami, FL 33156**

TITLE **VP** ☒ Change ☐ Addition  
NAME **Rodriguez, Remberto**  
STREET ADDRESS **10425 SW 79th Place**  
CITY- ST- ZIP **Miami, FL 33156**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Remberto Rodriguez**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/08/04 205448-8500**  
DATE DAYTIME PHONE