

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000433

**FILED**  
**Jan 26, 2016**  
**Secretary of State**  
**CC2675199323**

**Entity Name:** ST. BONIFACE GARDENS, INC.

**Current Principal Place of Business:**

11410 N KENDALL DR  
306  
MIAMI, FL 33176

**Current Mailing Address:**

11410 N KENDALL DR  
306  
MIAMI, FL 33176 US

**FEI Number:** 65-0984174

**Certificate of Status Desired:** No

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

J. PATRICK FITZGERALD, ESQUIRE  
110 MERRICK WAY  
SUITE 3-B  
CORAL GABLES, FL 33134 US

*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

**Officer/Director Detail :**

Title	PD	Title	TREASURER/SECRETARY
Name	MARIN, TOMAS M	Name	SOUCKAR, MICHAEL REV
Address	5400 SW 102 AVE	Address	9950 NW 29 STREET
City-State-Zip:	MIAMI FL 33165	City-State-Zip:	CORAL SPRINGS FL 33065
Title	VP		
Name	SOMARRIBA, MARCOS REV		
Address	1111 SW 107 AVE		
City-State-Zip:	MIAMI FL 33174		

*I hereby 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 all other like empowered.*

**SIGNATURE: TOMAS M. MARIN** **PD** **01/26/2016**  
\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail Date