## FILE NOW: FILING FEE AFTER MAY 1 18 \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

422831

(8)

GARDEN LAKES, INC.

Principal Place of Business  2000 NW 98TH AVE	Mailing Address  2000 NW 96TH AVE
MIAMI EL 92172	MIAMI FI 33172-2319

## FILED Jan 14 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified	3a. Dat	e of Last R	eport	
						04/05/1973		01/24/1996		
2. Principal f	Place of Business	2a. Mailing Add	2a. Mailing Address		4. FEI Number			pplied For		
21		26						t Applicable		
Su-te, Apt.			t, etc.					\$8.75 Additional		
22	27					5. Certificate of Status Desired	red Fee Required			
City & Sta	te	City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	· · · · · · · · · · · · · · · · · · ·	Country	1	B. This corporation has liability for i	ntangible	a under s	199.032,	
24	25	29	30			'	_ ~ _	No		
	g. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered A	gent		
ÇL.	IERRILL, BYRON			81	Name					
2000 N W 967H AVE			00	Charles A shall	70.0 0	1				
				82	82 Street Address (P.O. Box Number is Not Acceptable)					
ML	AMI FL 33172			83						
				84	City		FL	<b>85</b> Zip	Code	
	10 007	01.00 . 1.002 . 1.00 EL	N. D. J. J. J. J.		l	poration submits this statement for the p	· · -			
office or agent. La	registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such char oligations of, Section 607	nge was autho 7 0505, Florida	orized by Statute:	y the corporat s	ion's board of directors. I hereby accep	ot the appo	pintment as	registered	
SIGNATURE	Signature typest to printed the week real step of	Layer Land Otto Cappicable	(NOIL: Beg	estered Age	ent signature requi	red when reinstaking)	DATE			
12.	OFFICERS.	AND DIBECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND			
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	<b>-</b>		I	2.2 NAME						
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information indicated on this armual 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 chapter or or a attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/9730549×1736