


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2005 8:00 am
Secretary of State

03-02-2005 90095 045 ***150.00

DOCUMENT # 658637
 1. Entity Name
KINGS GARDENS HOMES, INC.



Principal Place of Business Mailing Address
~~11900 BISCAYNE BLVD. STE 802~~ ~~11900 BISCAYNE BLVD. STE 802~~
~~MIAMI FL 33181~~ ~~MIAMI FL 33181~~

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 # 301
 # 301

City & State City & State
 North Miami Beach, FL

Zip Country Zip Country
 33162 USA



1st MOORE CR2E034 (10/04)

4. FEI Number **59-1979846** Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ROSEN, ERROL
~~11900 BISCAYNE BLVD~~
~~SUITE 802~~
~~MIAMI FL 33181~~

7. Name and Address of New Registered Agent
 Name **ROSEN, ERROL**
 Street Address (P.O. Box Number is Not Acceptable)
7 Island Ave # 1605
 City **MIAMI BEACH** FL Zip Code **33139**

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 **ERROL ROSEN** DATE **2/24/05**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
 Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KAPELOW, PAUL 11900 BISCAYNE BLVD MIAMI FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KAPELOW, PAUL 16855 NE 2nd Ave #301 North Miami Beach, FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASV ROSER, ERROL 11900 BISCAYNE BLVD., #802 MIAMI FL 33181	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASV ROSEN, ERROL 16855 NE 2nd Ave #301 North Miami Beach, FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BROWN, PETER 11900 BISCAYNE BLVD., #802 MIAMI FL 33181	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BROWN, PETER 16855 NE 2nd Ave #301 North Miami Beach, FL 33162
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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: **ERROL ROSEN, Vice President** 2/24/05 305-892-8200
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #