FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 664435

(5)

7TH AVE. GARDENS, INC.

FILED
May 15 1997 8:00am
Secretary of State

Cop Benancy or MAZEO COD BENANCY IN MAZEO	Dringle of Dire	a of Duniosas		N.O.O.							<u> </u>
Second 17 AVENUE STE 1048 Sico SW 117 AVENUE STE 1048 Sico	•		D		n						•
US S. Date incorporated or Custrict Sa. Date incorporated or Custrict Sa. Date of Less Report O2/2/2/1980 O2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/			8900 SW 11	7 AVENUE ST							
22. Mo mg Address 28. Mo mg Address 28. Mo mg Address 28. Sept 1983242		16		3186-2155			-	,			•
Solite, Apt F, etc. Solition	2. Principal P	lace of Business	2a. Mailing	Address				4. FEI Number			
City & Sinte Ci	21							59-1983242			
City & State Country 28 29 20 20 20 20 20 20 20	·	#, etc.	F	pt. #, etc.				5. Certificate of Status Desired			
22 P COUNTY 70 COUNTY 170 COUNTY		A		State				6 Fleetien Compoint Financing			
Country Zep 20 30	·	•	<u>⊢</u> — `	, care			i	· · ·			
9. Name and Address of Current Registered Agent REISMAN, JOSEPH B. ONE SE THIRD AVE_2800 AMERIFIRST FED.BLDG MIAMI FL 33131 82 Site of Address (P.O. Box Number is Not Acceptable) 83 Site of Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Codo 11. Pursuant to the provisions of Sections 607 5002 and 607 1508, Florida Sishikas, the above-named corporation submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Subh change was and horseld by the corporation's board of directors. Thereby security has paperment as registered office or registered agent, or both, in the State of Florida Subh change was and horseld by the corporation's board of directors. Thereby security has paperment as registered office or registered region, or both, in the State of Florida Subh change was and horseld by the corporation's board of directors. Thereby security has paperment as registered office or registered region, or both, in the State of Florida Subh change was and horseld by the corporation's board of directors. Thereby security has paperment as registered agent and the registered agent agent and the registered agent agent agent and the registered agent		Country	the second contract of the second		Country						
REISMAN, JOSEPH B. ONE SE THIRD AVE_2800 AMERIFIRST FED.BLDS MIAMI FL 33131 82 Since Address (F.O. Box Number is Not Acceptable) 83 See Otty FL 85 Zip Code F	24				30			Florida Statutes	Yes [] No	,
TI. Pursuant to the provisions of Sections 607 0502 and 607 1506, Fiorida Statutes, the above-named corporation's board of directors. I horohy accopt the appointment as registered agent. Let him the State of Horohy accopt the appointment as registered agent. I mention with, and accept the obligations of. Section 607 0505, Fiorida Statutes, the above-named corporation's board of directors. I horohy accopt the appointment as registered agent. Let mention with, and accept the obligations of. Section 607 0505, Fiorida Statutes, the above-named corporation's board of directors. I horohy accopt the appointment as registered agent. Let mention with, and accept the obligations of. Section 607 0505, Fiorida Statutes SIGNATURE 12. OF Incers AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OF INCERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. AND THE TABLE TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. The STOP MARK PROVIDED TO THE STATE ADDRESS OFFI ACCEPTAGE TO THE S		9. Name and Address of Curre	nt Registered Ag	ent		,		10. Name and Address of New Re	gistered A	gent	
### City ###					81	Name	e				
83 84 City FL 85 Zip Code			rst fed.bldg		82	Stree	el Addres	s (P.O. Box Number is Not Acceptal	ole)		
Section Sect	MIAI	MI FL 33131				ļ					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos. the above-named corporation submiss this statement for the purpose of changing its registered office or registered agent, i am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos, Florida					83						
11. Pursuant to the provisions of Sections 607 0502 and 607 1506. Florida Statutos. The photo-panied corporation submits this statement for the purpose of changing its registered agree. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutos. SIGNATURE Signature typical or product ministration of the purpose of changing its registered signature with, and accept the obligations of, Section 607 0505, Florida Statutos. SIGNATURE Signature typical or product ministration of the purpose of changing its registered signature with an advantage of the obligations of, Section 607 0505, Florida Statutos. SIGNATURE PTD					84	City			EI	85 Zip	Code
SIGNATURE Signature system or primed name with, and accept the obligations of, section 807,0509, Florida Statutes Signature system or primed name with represent state of any each tempore of state and each tempore of state an	11. Purcuant	to the provisions of Sections 607 066	12 and 607 1409	Florida Statut	as the show	e-nemo	d corner	ation submits this elatoment for the		changing	ite remietared
SIGNATURE Signature inputs or primed ramaged implement and agenerated liter displaced to (IROTI Respices adaptive segmenter transport and state in excision (IROTI Respices adaptive segmenter transport and state in excision (IROTI Respices adaptive segmenter transport adapti	office or r	egistered agent, or both, in the State	of Florida, Such	change was a	authorized by	the ca	orporation	's board of directors. I hereby accept	pt the appo	ointment a	s registered
Signature spread or primed ranged approach or (RSTI) Sequence at agent capture required at site in creating) DATE	•	m tamiliar with, and accept the oblig	ations of, Section	607.0505, 110	orida Statute:	6					
TITLE PTD DELETE 1.1 TITLE Change Addition NAME RIBA, ANTONIO 1.2 MAME STREET ADDRESS MIAMI, FL 00000 1.4 CIV'- ST- ZIP NAME SVD DELETE 2.1 TITLE Change Addition NAME RIBA, RAMON 2.2 MAME NAME STREET ADDRESS NIAMI, FL 00000 2.4 CIV'- ST- ZIP NITTLE AS DELETE 3.1 TITLE Change Addition NAME RIBANAN, JOSEPH B. 3.2 MAME NAME RIBANAN, JOSEPH B. 3.2 MAME NAME RIBANAN, JOSEPH B. 3.4 MAME NAME STREET ADDRESS MIAMI FL Change Addition NAME A CIV'- ST- ZIP NAME STREET ADDRESS NAME A CIV'- ST- ZIP NAME STREET ADDRESS NAME S	SIGNATURE	Signature, typed or printed name of registered ag	est and tile if applicable	(NOI	Flogistered Age	ni signatu	are required	when rematating)	DATE		
NAME STREET ADDRESS ONE SE SRD AVE #2800 ONE S E SRD AVE #2800 MIAMI, FL 00000 NAME NIBA, RAMON ONE S E SRD AVE #2800 NAME NIBA, RAMON ONE S E SRD AVE #2800 ONE S E SRD AVE #2			nan en experient articipale e er						ERS AND	DIRECTO	R\$ IN 12
STREET ADDRESS ONE \$ E SRD AVE #2600 1.8 STREET ADDRESS 1.4 CITY-ST-ZIP	TITLE			DELETE	1.1 3(TLF			THE THE SECTION OF THE PROPERTY OF THE SECTION OF T		☐ Change	Addition
TITLE SVD DELETE 21 TITLE DORESS DATE #2800 DELETE 3.1 TITLE AS DELETE 3.1 TITLE AS DELETE 3.1 TITLE AS DELETE 3.1 TITLE AS DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE DORESS DIV-ST-ZIP MIAMI, FL 00000 AS STREET ADDRESS DIV-ST-ZIP DELETE AS STREET ADDRESS DIV-ST-ZIP DELETE AS STREET ADDRESS DIV-ST-ZIP DELETE AS DELETE AS DIV-ST-ZIP DELETE DORESS DIV-ST-ZIP DELETE DELETE DORESS DIV-ST-ZIP DELETE DELETE DELETE DELETE DELETE DIVILED DELETE DELETE DELETE DELETE DIVILED DELETE	NAME				1.2 NAME						
TITLE NAME RIBA, RAMON ONE S E 3RD AVE #2600 22 STREET ADDRESS OTIV: ST-ZIP MIAMI, FL 00000 23 STREET ADDRESS ONE SE 3RD AVE #2600 MIAMI, FL 00000 24 CITY: ST-ZIP NAME REISMAN, JOSEPH B. 32 NAME STREET ADDRESS ONE SE 3RD AVE #2600 33 STREET ADDRESS ONE SE 3RD AVE #2600 34 CITY: ST-ZIP NAME STREET ADDRESS ONE SE 3RD AVE #2600 44 CITY: ST-ZIP TITLE DELETE JELETE JEL	STREET ADDRESS				1.3 STREET	ADORESS	8				
NAME STREET ADDRESS ONE \$ E 3RD AVE #2600 STREET ADDRESS ONE \$ E 3RD AVE #2600 STREET ADDRESS ONE \$ E 3RD AVE #2600 STREET ADDRESS ONE \$ B 3RD AVE #2600 STREET	CITY-ST-ZIP				1.4 C(1Y - S	T-7IP					
STREET ADDRESS CITY-ST-ZIP MIAMI, FL 00000 2.4 CITY-ST-ZIP TITLE AS DELETE 3.1 TITLE AS ONE SE 3RD AVE #2600 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME ACITY-ST-ZIP TITLE NAME ACITY-ST-ZIP TITLE NAME ACITY-ST-ZIP TITLE NAME ACITY-ST-ZIP TITLE DELETE ACITY-ST-ZIP TITLE DELETE ACITY-ST-ZIP TITLE DELETE ACITY-ST-ZIP ACITY-ST-ZIP TITLE DELETE ACITY-ST-ZIP ACITY-ST-ZIP DELETE ACITY-ST-ZIP TITLE DELETE ACITY-ST-ZIP Change Addition Addition Addition ACITY-ST-ZIP ACITY-ST-ZIP TITLE DELETE ACITY-ST-ZIP ACITY-ST-ZIP DELETE ACITY-ST-ZIP A	TITLE		l] DELĒTE	2.1 TITLE					Change	Addition
CITY-ST-ZIP MIAMI, FL 00000 2.4 CITY-ST-ZIP TITLE AS DELETE 3.1 TITLE 3.2 NAME STREET ADDRESS ONE SE 3RD AVE \$2600 3.5 STREET ADDRESS CITY-ST-ZIP MIAMI FL DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.2 NAME STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.5 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 5.1 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 5.5 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP NAME 6.4 CIT											
TITLE AS DELETE 3.1 TITLE 3.2 NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME STREET ADDRESS 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 6.1 TITLE CHANGE 5.3 STREET ADDRESS CITY-ST-ZIP 6.1 TITLE CHANGE 5.3 STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS CITY-S					2.3 STREET	ADDRESS	ŝ				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE A1.1TITLE A2.1 NAME A3.5 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE CHange Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE A3.6 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.5 STREET ADDRESS CITY-ST-ZIP 5.6 STREET ADDRESS CITY-ST-ZIP 5.7 NAME STREET ADDRESS CITY-ST-ZIP 5.8 STREET ADDRESS CITY-ST-ZIP 5.9 STREET ADDRESS CITY-ST-ZIP 5.1 STREET ADDRESS CITY-ST-ZIP 5.2 NAME STREET ADDRESS CITY-ST-ZIP 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.5 STREET ADDRESS CITY-ST-ZIP 5.6 STREET ADDRESS CITY-ST-ZIP 5.7 NAME STREET ADDRESS CITY-ST-ZIP 5.8 STREET ADDRESS CITY-ST-ZIP 5.9 STREET ADDRESS CITY-ST-ZIP 5.1 URL Change Addition Additio				DELETE		S1-ZIP				Change	Medition
STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE DELETE DELETE A1 TITLE A2 STREET ADDRESS CITY- ST-ZIP TITLE DELETE DELET			L	DELETE						Change	L_J Agonion
TITLE DELETE 4.1 TITLE Change Addition NAME STREET ADDRESS CITY- ST-ZIP TITLE DELETE 5.1 TITLE CHANGE STREET ADDRESS CITY- ST-ZIP TITLE DELETE 5.1 TITLE CHANGE STREET ADDRESS CITY- ST-ZIP TITLE DELETE 5.1 TITLE CHANGE STREET ADDRESS CITY- ST-ZIP TITLE DELETE 5.1 TITLE CHANGE STREET ADDRESS CITY- ST-ZIP TITLE DELETE 5.1 TITLE CHANGE STREET ADDRESS CITY- ST-ZIP TITLE DELETE 6.1 TITLE CHANGE STREET ADDRESS CITY- ST-ZIP TITLE CHANGE CHANGE STREET ADDRESS CITY- ST-ZIP TITLE CHANGE CHANGE STREET ADDRESS CITY- ST-ZIP THE CHANGE						ADDOLEC	_				
TRUE DELETE 4.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP A4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.1 TITLE Change Addition Addition Addition Change Addition Addition Change Addition Addition Addition STREET ADDRESS CITY-ST-ZIP TITLE CHANGE Addition STREET ADDRESS CITY-ST-ZIP Addition Addition Addition Addition Addition Addition Figure Addition Add							9				
NAME STREET ADDRESS CITY-ST-ZIP A4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition AMME STREET ADDRESS CITY-ST-ZIP 6.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE Change Addition Addition AMME 6.3 STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information sylvalied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules, I further certify that the information indicated on this annual record is true and accurate and that my signature shall have the same logal effect as if made under onth the information indicated on this annual record is true and accurate and that my signature shall have the same logal effect as if made under onth the information indicated on this annual record is true and accurate and that my signature shall have the same logal effect as if made under onth the		711W WALL 1 W		DELETE		01-51r				Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE DELETE 5.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE THE CHANGE STREET ADDRESS CITY-ST-ZIP TITLE THE CHANGE THE CH			•								<u> </u>
CITY-ST-ZIP TITLE DELETE 5.1 TITLE SAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE Change Addition Additio						ADDRESS	s				
NAME STREET ADDRESS CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TILLE Change Addition 6.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.4 do hereby certify that the information sylvilied 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 annual report is true and accurate and that my signature shall have the same logal effect as if made under path, the					4.4 CHY - 9	ST-ZIP					
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 THLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information sylvilided with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further certify that the information sylvilided 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 annual report is true and accurate and that my signature shall have the same logal effect as if made under path, the	TITLE			DELETE	5.1 TITLE					Change	Addition
CITY-ST-ZIP TITLE DELETE 6.1 THE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information sylvilided 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 annual report is true and accurate and that my signature shall have the same logal effect as if made under path, the	NAME				5.2 NAME						
TITLE DELETE 61 Title Change Addition	STREET ADDRESS				5.3 STREET	ADDRESS	3				
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information sylvilided 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 annual report is true and accurate and that my signature shall have the same logal effect as if made under path, the	CITY-ST-ZIP				5.4 CITY - 9	ST - ZIP					
STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information sylvilided 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 annual report is true and accurate and that my signature shall have the same local effect as if made under path, the	TITLE		I	DELETE	6.1 THILE					☐ Change	Addition
CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I do hereby certify that the information sylvilided with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under path; the	i				6.2 NAME						
14. I do hereby certify that the information sylvified 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 annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path, the	STREET ADDRESS				6.3 STREET	ADURESS	ŝ				
information indicated on this annual revolution of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; the		1									
Lam on officer or director of the Algoritation or the receiver or to stee announced to execute this report of required by Chapter CO7. Florida Ctatular, and that my report	informatio	on indicated on this annual report or :	supplemental ann	nual report is t	rue and acci	urale ar	nd that m	v signature shall have the same leg:	al effect as	if made u	nder oath: tha
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 in Name or on an attachment with an address.	l am an o	fficer or director of the Corporation o	r the receiver or to	rustee empow	vered to exec	ute this	s report a	s required by Chapter 607, Florida S	Statutes; ar	id that my	name