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

PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Blo

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 21 1997 8:00am

A ANDREA GRAND COME HAGEN CHIMA CHAN BOND DECIN CARDI DIONI CAGAL CAGA CARDI ACCA

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 677660

(3)

THE BOTANICAL GARDEN CENTER, INC.

Principal Place of Business Mailing Address						HAN BINN BUN BI	IBIN BIRNI BIBIN BIBIN BIBIN I	UIOH IOH	
19110 KROME AVEMUE 19110 KROME AVE									
MIAMI FL 3318	7	MIAMI FL 33187	MIAMI FL 33187						
					3. Date Incorporated or	Qualified	3a. Date of Last R	eport	
					07/07/1980		05/01/1996		
	ace of Business	2a. Mailing Address			4. FEI Number		 	plied For	
21 Suite, Apt. #, etc		26 Couts Apt # sts	Suite, Apt. #, etc.			59-2012515 Not Applicable \$8.75 Additional			
22		27	F-7			5. Certificate of Status Desired LJ Fee Required			
City & State		├ ¬ *	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23 Zip	Country	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25	}	30	•	Florida Statutes				
	9, Name and Address of Curren				10. Name and Address	of New Reg	Istered Agent		
GLASSFORD, DALE C					arrie Lavo	urano	2. Esqui	0	
PARK PLACE OF KENDALL			h	32 Street A	ddress (P.O. Box Number is No	t Acceptable		16	
1341		L		(250 SW 83	3 Sty	reat			
MIAMI FL 33186				83	•				
			h	B4 City			85 _Zinvi	Code -	
					Miami		FL 32	5173	
11. Pursuant I	to the myvisions of Sections 607 0502	? and 607.1508. Florida Statute of Florida, Such change was a	es, the about of the second	ove-named of by the corp	corporation submits this stateme	int for the purification	rpose of changing it	s registered	
agent. La	egistered agent, or both, in the State in familiar with, and accept the obliga	itions of, Section 607.0505, Flo	rida Statu	ites.			97	709.0.0.00	
SIGNATURE	July Na	vargna				11101	7/		
12,	Signicies Typic or princial native of expisioner age: OFFICERS AND	<u></u>	: Registered	Agent signature r	equired when reinstating) ADDITIONS/CHANGE	TO OFFICE	DATE	C	
TOTLE	FDC	DELETE		E	ADDITIONO/OFIANGE	3 10 OI 101	Change	Addition	
NAME	LAVARGNA, ANTHONY H.		1.2 NAME						
STREET ADDRESS	19100 KROME AVE.			EET ADDRESS					
CITY - ST - ZIP	MIAMI FL		1.4 CITY - ST - ZIP						
TITLE	VD DELETE		2.1 TITL	+			☐ Change	Addition	
NAME	LAVARGNA, LISA		2.2 NAME						
STREET ADDRESS	19100 KROME AVE.		2 3 STREET ADDRESS						
City-St-ZIP	MIAMI FL		2 4 CIT	Y-ST-ZIP					
TITLE	VPD □ DELETE		3 1 TITL	E			☐ Change	Addition	
NAME	Branham, toni lynn		3.2 NAM	NE					
STREET ADDRESS	19663 S.W. 82ND CT.		3.3 STR	EET ADDRESS					
CHY-ST-ZIP	MIAMI FL	—		Y-ST-ZIP					
TITLE	STD	DELETE	4.1 TITL				Change	Addition	
NAME	LAVARGNA, LAURENCE P.		4 2 NA						
STREET ADDRESS	9395 S.W. 66 ST.			EET ADDRESS					
CITY-ST-7IP	MIAMI FL	T for the		Y-ST-ZIP	a		[1 6	No alternative	
TITLE	VD	DELETE	5.) TITU		•.		Change	Addition	
NAME DADEST NOVO CO.	BRULESON, CINDY LEE		5.2 NAM		\				
STREET ADDRESS	19001 SW 272 STREET			EET ADDRESS					
CITY-S1-ZIP TITLE	HOMESTEAD FL	DELETE	5.4 CIT	r-ST-ZIP			Change	Addition	
		LJ DELETE	6.2 NAM				- Change	- rodition	
NAME STREET ADORESS									
				EET ADDRESS				ļ	
14. I do heret	by certify that the information supplied	I with this filing does not qualif		Y-ST-ZIP exemption st	ated in Section 119.07(3)(i), Flor	ida Statutes	. I further certify that	the	

information indicated on this annual 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 exportation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

ent with an address.