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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 677661

(1)

THE BOTANICAL GARDENS NURSERY, INC.

## **FILED** Jul 06 1998 8:00am Secretary of State



				<u> </u>		:  <b>                                    </b>	(1 <b>i i i i</b>
Principal Plac	e of Business	Mailing Address			1 (401) 4 01111 (401) (401) 01114 0110 1101 0101 010	A GIGIF BIBII BIBII BEBI	at state
19110 KROME AVE. 19110 KROME AVE.							
MIAMI FL 331	67 <b>-200</b> 4	MIAMI FL 33187-2004		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					07/07/1980		
2. Principal F	lace of Business	2a. Mailing Address			4. FEI Number	Applie	d For
21		26 /9/20 K	Rom E	AVE	59-2034080	Not Ar	pplicable
Suite, Apt. #, etc.		26 /9/20 KRCM = AVE Suite, Apt. #, otc. 27 M/A FLA		5. Certificate of Status Desired	<b>\$8.75</b> Addi	itional	
22		27 M/A F	LA		5. Certificate of Status Desired	Fee Requir	red
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May	у Ве
23		28			Trust Fund Contribution	Added to Fe	ees
—₁ Zip	Country	- Zip 73/032	Country		8. This corporation owes or has paid the co		
24	25] 9. Name and Address of Curren		30 )	405	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No	0
		r vedistered wheir	81 1	Name	10. Name and Address of New Registered	Agent	
LAVARGNA, CARRIE E 9250 SW 83RD STREET			[0.]	Name /			
			82 5	Street Addre	ess (P.O. Box Number is Not Acceptable)	7 / -	
MIA	MI FL 33173		83			<del>/</del>	
	~				<i>(</i>		
			84 (	City	FI	85 Zip Code	е
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statute	s the above-n	amed coro	oration submits this statement for the purpose	of changing its re	nistered
office or r	egistered agent, or both, in the State im familiar with, and accept the obligations.	of Florida. Such change was a	uthorized by th	e corporation	on's board of directors. I hereby accept the ap	pointment as regi	istered
SIGNATURE							
10	Signature, typod or printed name of registered age		Registered Agent s	ignature require		D DIDECTORS II	140
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN		Addition
NAME	LAVARGNA, ANTHONY H.	C) Vitti	1.2 NAME	l		L_1 Onlings L_	_ Aparton
STREET ADDRESS	ALLA MAGNE ME			norec			
	MIAMI FL		1.3 STREET ADD	į.			
CITY-ST-ZIP TITLE	VD	☐ DELETE	1.4 CITY - ST - Z 2.1 TITLE	JP		Change	Addition
NAME	LAVARGNA, LISA		2.2 NAME				_ 110011011
STREET ADDRESS	ATTACA AND ADDRESS AND ADDRESS		2.3 STREET ADD	narce			
CITY-ST-ZIP	MIAMI FL		2.5 STREET AUG				
TITLE	VPD	DELETE	3.1 TITLE	LIF		Change	Addition
NAME	BRANHAM, TONI LYNN		3.2 NAME				
STREET ADDRESS	19663 S.W. 82 CT.		3.3 STREET ADI	OBESS			
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-7				
TITLE	STD	DELETE	4.1 TITLE			Change	Addition
NAME	LAVARGNA, LAURENCE P.	**************************************	4. 2 NAME				
STREET ADDRESS	9395 S.W. 66 ST.		4.3 STREET ADI	DRESS			
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-Z				
TITLE	VD VD	DELL FE	5.1 TITLE			Change	Addition
NAME	<b>BURLESON</b> , CINDY	<del></del>	5.2 NAME			•	
STREET ADDRESS	19001 SW 272 STREET		5.3 STREET ADD	ORESS			
CITY-ST-ZIP	HOMESTEAD FL		5.4 CITY-ST-Z				
TITLE	(TAMESTERS   F	DELETE	6.1 TITLE	"		Change	Addition
NAME	! 		6.2 NAME 1		7000025815		1/1
STREET ADDRESS	• 1 7.		6.3 STREET ADD	ORESS	-07/07/98010630	പ്പ് )'	ا رارړُ
CITY-ST-ZIP			6.4 CHY-SI-Z		***450.00	15 //	′ ′ ¯
UIIT TO 1 * ZIF			■ 0.4 UH1 - 31-Z		777730110		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Soction 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 changed, or on an attachment with an address





PHONE 235-5465

## The Botanical Gardens Nursery

The Finest in Plant Materials
Grove Division

Mailing Address: 19120 KROME AVENUE PERRINE, FLORIDA 33187

Division of Corporations Annual Reports Filings PO Box 1500 Tallahassee, Fl 32302-1500

To: Department of State

Arom: Anthony Lavargna

Ref. Corporate Annual P.Eports

Date: June 26, 1998

Dear Gentlemen:

We did not receive the first notice forms for filing the Corporate Annual Returns for the following 3 corporations. They were mailed to an old address.

- 1. The Botanical Garden Center, Inc. Document # 677660
- 2. The Botanical Gardens Nursery, Inc. Document # 677661
- 3. Everglades Sod and Landscaping, Inc Document # 251520

The correct address for all three corporations is 19120 Krame Ave Miami, Pla 33187.

Please consider aboting any penalty due in view of this problem. Attached please find a check for \$450.00. Normal fee to cover all 3 corporations.

Anthony Lavarana

yours Truly,