SIGNATURE

## ROSE GARDENS CONDOMINIUM INC

Principal Place of Business C/O HAWAIIAN GARDENS PHASE 7 4705 N.W. 35 STREET LAUDERDALE LAKES FL 33319

Mailing Address

C/O HAWAIIAN GARDENS PHASE 7 4705 N.W. 35 STREET LAUDERDALE LAKES FL 33319-5480

Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

**FILED** Apr 10, 2000 8:00 am Secretary of State

04-10-2000 90126 001 \*\*\*306.25

TOOPI

Applied For

Zip Code



DO NOT WRITE IN THIS SPACE

Sity & State		Only & State	Only a state			59-1537965		
Zip	Country	Zip Country		5Certificate	of Status Desired		\$8.75 Additional Fee Required	
6.	Name and Address of Curr	ent Registered Agent			7Name and	Address of New R	egistere	d Agent
				Name			-	
HAWAIIAN GARDENS PHASE 7 ASSOCIATION		Street Address (P.O. Box Number is Not Acceptable)						
1705 N.W. 35TI	H ST.							· · · · · · · · · · · · · · · · · · ·

LAUDERDALE LAKES FL 33319

City 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.

4. FEI Number

Signature, typed or printed name of registered agent and title if applicable

Make Check Payable to

FILE NOW:

9. Election Campaign Financing

\$5.00 May Be

	FEE IS \$61.25	Trust Fund Contribut	tion. 🗓	Added to Fees	Department of State	,	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	TD	Delete	TITLE	10	Change	Addition	
NAME	KLARMAN, MARTY	• •	NAME	Guy Hould		1.	
STREET ADDRESS	3501 N W 47TH AVENUE		STREET ADDRESS	Same Address			
CITY-ST-ZIP	LAUDERDALE LAKES, FL00000 FL 3	3319	CITY-ST-ZIP	<u> </u>	<u> </u>	Addition	
TITLE	SD	Delete	TITLE	50	🔀 Change	Addition	
NAME	KLARMAN, BELLA	••	NAME	Mary Pecora		ļ	
STREET ADDRESS	3501 NW 47TH AVE.		STREET ADDRESS	Same Address		ľ	
CITY-ST-ZIP	LAUDERDALE LKS, FL 33319	<del></del>	CITY-ST-ZIP -	<u> </u>			
TITLE	ΓVD	🔽 Delete	TITLE	VO	XX Change	Addition	
NAME	BOUER, MATTY	-1	NAME	Gisele Michaud	l	Ì	
STREET ADDRESS	3501 NW 47TH AVENUE		STREET ADDRESS	Same Address		ļ	
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33319		CITY-ST-ZIP	<u> </u>			
TITLE	P	📈 Delete	TITLE	P	Change	☐ Addition	
NAME	GOLDSMITH, EDITH	•	NAME	Yvon Pelletier	•	{	
STREET ADDRESS	3501 N W 47TH AVENUE		STREET ADDRESS	Same Address		]	
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33319		CITY-ST-ZIP	<u>1</u> 1			
TITLE	VD	🔀 Delete	TITLE	VD	Change	Addition	
NAME	GOLDSMITH, LARRY	,	NAME	Wayne Smith		ł	
STREET ADDRESS	3501 NW 47TH AVE		STREET ADDRESS	Same Address	•	1	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33319		CITY-ST-ZIP				
TITLE	<b>V</b> D	🔀 Delete	; TITLE	1	☐ Change	☐ Addition	
NAME	PELLETIER, YVON	* \	NAME	1	•		
STREET ADDRESS	3501 NW 47TH AVE.		STREET ADDRESS			ì	
CITY-ST-ZIP	LAUDERDALE LAKES EL 33319		CITY-ST-ZIP	1		1	

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 617, 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: