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Mar 26 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mertham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 741118 (4)  
1. Corporation Name  
THE PRESIDENTS COUNCIL OF MAR-LEN GARDEN'S, INC.



Principal Place of Business Mailing Address  
16800 NE 14TH AVE 16800 NE 14TH AVE  
NORTH MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL 33162

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 29 Country

3. Date Incorporated or Qualified  
11/14/1977  
4. FEI Number 58-2060927 Applied For Not Applicable  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association? Yes No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent  
SOUTHERTON, EDITH  
16800 NE 14TH AVE  
N MIAMI BCH FL 33162

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number Is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the implications of the Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE PD  
NAME MITCHELL, LIONEL  
STREET ADDRESS 16900 NE 14TH AVE  
CITY-ST-ZIP N MIAMI BCH FL  
TITLE VP  
NAME GOLD, EMANUEL  
STREET ADDRESS 16900 NE 14 AVE  
CITY-ST-ZIP N MIAMI BCH FL  
TITLE VPD  
NAME GILMAN, LOUIS  
STREET ADDRESS 16790 NE 14TH AVE  
CITY-ST-ZIP N MIAMI BCH FL  
TITLE S  
NAME BOKASH, ELIZABETH  
STREET ADDRESS 16701 NE 13TH AVE  
CITY-ST-ZIP N MIAMI BCH FL  
TITLE T  
NAME SMOLAR, MAX  
STREET ADDRESS 17000 NE 14TH AVE  
CITY-ST-ZIP N. MIAMI BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE VPD  
2.2 NAME Gold, Emanuel  
2.3 STREET ADDRESS 16900 NE 14th Ave  
2.4 CITY-ST-ZIP N. Miami Beach, Fla.  
3.1 TITLE 2nd V.P.D  
3.2 NAME TABAK, VILEM  
3.3 STREET ADDRESS 17090 NE 14 Ave  
3.4 CITY-ST-ZIP N MIAMI BEACH, FL  
4.1 TITLE S  
4.2 NAME HEBERT, ELIZABETH  
4.3 STREET ADDRESS 1355 NE 167 ST  
4.4 CITY-ST-ZIP N Miami Beach, Fla.  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ LIONEL MITCHELL 3/4/98 305-947-4511

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