## 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 # F86659

(2)

SABREENA'S GARDEN NURSERY, INC.

## FILED Feb 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address  W PEDRO P. OJEDA  W PEDRO P. OJEDA					a 1981195 tibi feure ettin ditai Britz (Ett Bibli ettil Bibli Afbit Afbit 1981		
5120 8W 208TH LANE FT. LAUDERDALE FL 33332		5120 SW 208TH LANE				DO NOT WRITE IN THIS SPACE	
FI. LAUDEHD	PALE PL 33332	FT. LAUDERDALE FL 33	332			3. Date Incorporated or Qualified	
i I						06/23/1982	
2 Principal P	Yace of Business	2a, Mailing Address			<del></del>	4. FEI Number Applied For	
	Idea of Educations	<del>}</del>	ailing Address				
Suite, Apt.	# plc	Suite, Apt. #, etc.				59-2214285   Not Applicable   \$8.75 Additional	
22	<b>#</b> , <b>9</b> 10.	<b>⊢</b>				5. Certificate of Status Desired Fee Required	
City & Stat	Α	City & State					
<u> </u>		<b>├</b> ──				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip Country					
24	25	<del> </del>	30	,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, Yes No	
24	9. Name and Address of Current	29     Registered Agent	30	-		10. Name and Address of New Registered Agent	
		Hogistored regulit		B1	Name	10, Harris and Addison of Hori Hogistonia Agent	
	EDA, PEDRO P.						
5120 SW 208TH LANE			1	82	Street Address (P.O. Box Number is Not Acceptable)		
FI.	LAUDERDALE FL 33332		ļ.	B3			
				0.0			
			ŧ	B4	City	B5 Zip Code	
						poration submits this statement for the purpose of changing its registered	
agent I a SIGNATURE	m familiar with, and accept the obligat	tions of, Section 607.0505, F	authorized Iorida Statu	by tes	the corporati	ion's board of directors. I hereby accept the appointment as registered	
	Signature, typod or printed name of registered again			Agar	nt signature requite	red when reinstating) DATE	
12.	OFFICERS AND	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	O IEDA THERESA I	☐ beceit	1,1 Titl			T Cusude T vocation	
NAME	OJEDA, THERESA J		1.2 NAM				
STREET ADDRESS			1.3 STR	EE1 A	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		1.4 CITY - \$1		I - ZIP		
TITLE	1	☐ DELETE	1	21 TITLE		☐ Change ☐ Addition	
NAME	OJEDA, GLADYS		2 2 NAN	Æ			
STREET ADDRESS	5130 SW 208TH LANE, 5130		2.3 STR	EET #	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		2. 4 CIT	Y - S1	T-ZIP		
TITLE	P	DELETE	3.1 THE	3.1 T( L€		Change Addition	
NAME	OJEDA, PEDRO R		3.2 NAM	Æ	l		
STREET ADDRESS	5130 SW 208TH LANE, 5130		3.3 STR	EET #	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		3.4. CH	Y- \$1	1-ZIP		
TITLE	V	☐ DELETE	411111	E		☐ Change ☐ Addition	
NAME	ojeda, pedro p		4. 2 NA	ME			
STREET ADDRESS	5120 SW 208TH LANE, 5120		4.3 STA	EE1 #	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		4.4 CITY	/-S1	1- <i>2</i> 1P		
TITLE		DELETE	5.1 T(TL)			Change Addition	
NAME			5.2 NAM	Æ	1		
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			5.4 CITY				
TITLE		DELETE	61 TITL			☐ Change ☐ Addition	
NAME			62 NAM		ľ		
STREET ADDRESS			1		ADDRESS		
GITTLE AUTOCO			0.5 5 1 10		DOMEST		

14. Thereby 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 arrival 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or own attachment with an address.

ICMATURE.

2-10-98

254-434-1-458