

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 19 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000000341 (8)

1. Corporation Name

ARDEN INVESTMENTS, INC.

Principal Place of Business

2800 ISLAND BLVD., #2902
N. MIAMI BEACH FL 33180

Mailing Address

2800 ISLAND BLVD., #2902
N. MIAMI BEACH FL 33180

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/25/1993

3a. Date of Last Report

04/15/1994

2. Principal Place of Business

21 17058 White Haven Dr.

2a. Mailing Address

26 17058 White Haven Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 BOCA RATON, FL.

28 BOCA RATON, FL.

24 33496

25 U.S.A.

29 33496

30 U.S.A.

4. FEI Number

75-1769007

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NATHANSON, MONTE P
2800 ISLAND BLVD., #2902
NORTH MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

81 Name

NATHANSON, MONTE P

82 Street Address (P.O. Box Number is Not Acceptable)

17058 WHITE HAVEN DR.

83

84 City

BOCA RATON

FL

85 Zip Code

33496

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when modifying)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CPD
NAME	NATHANSON, MONTE P
STREET ADDRESS	2800 ISL BLVD 2902
CITY, ST, ZIP	N MIAMI BCH FL
TITLE	V
NAME	GREENSPOON, WARREN
STREET ADDRESS	5792 NW 39 WAY
CITY, ST, ZIP	BOCA RATON FL
TITLE	S
NAME	NATHANSON, JUNE A
STREET ADDRESS	2800 ISL BLVD 2902
CITY, ST, ZIP	N MIAMI BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	C D	☒ Change ☐ Addition
12 NAME	NATHANSON, MONTE P	
13 STREET ADDRESS	17058 WHITE HAVEN DR.	
14 CITY, ST, ZIP	BOCA RATON, FL., 33496	
21 TITLE		☒ Change ☐ Addition
22 NAME	GREENSPOON, WARREN	
23 STREET ADDRESS	5804 N.W. 35th Way	
24 CITY, ST, ZIP	BOCA RATON, FL., 33496	
31 TITLE	S	☒ Change ☐ Addition
32 NAME	NATHANSON, JUNE A	
33 STREET ADDRESS	17058 WHITE HAVEN DR.	
34 CITY, ST, ZIP	BOCA RATON, FL., 33496	
41 TITLE	P D	☐ Change ☒ Addition
42 NAME	STEINBERG, SHERRYL	
43 STREET ADDRESS	5855 PADDINGTON WAY	
44 CITY, ST, ZIP	BOCA RATON, FL., 33496	
51 TITLE	D	☐ Change ☒ Addition
52 NAME	GREENSPOON, GAIL	
53 STREET ADDRESS	5804 N.W. 35th Way	
54 CITY, ST, ZIP	BOCA RATON, FL., 33496	
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Monte Nathanson 4/14/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature Photo