

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

FILED

Apr 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **G37358**

(0)

1. Corporation Name

VANDERBILT PARK, INC.

Principal Place of Business

**5545 PINE TREE DRIVE
MIAMI BEACH FL 33140
US**

Mailing Address

**C/O GUILLERMO GENER
P.O. BOX 43-2281
MIAMI FL 33234-2281
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/06/1983

4. FEI Number

59-2379885

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**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1108-88th.Street

Suite, Apt. #, etc.

22 Surfside, Fla.33154

City & State

23

Zip

24

Country

25

2a. Mailing Address

26 P.O.Box 432281

Suite, Apt. #, etc.

27 c/o Guillermo Gener

City & State

28 Miami, Fla.33243-2281

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**GENER, GUILLERMO
8818 SW SUNSET DR.
P.O. BOX 43-2281
MIAMI FL 33173**

Mailing address:
**P.O.Box 43-2281
Miami, Fla.33243-2281**

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 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PT** ☐ DELETE

NAME **ZANARDI, OLIMPIA R**
STREET ADDRESS **5545 PINETREE DR.**
CITY-ST-ZIP **MIAMI BCH FL**
**New address:
1108-88th.Street
Surfside, Fl.33154**

TITLE **VPS** ☐ DELETE

NAME **GENER, GUILLERMO**
STREET ADDRESS **8818 SW SUNSET DR.**
CITY-ST-ZIP **MIAMI FL 33173**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 acceptor 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 attached statement with an address.

SIGNATURE:

[Handwritten Signature] VPS Filed 17/98-275-8980

CR2E034 (10/97)