


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # K13110</b> 1. Entity Name GARDEN LAKES INVESTMENTS, INC.	
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Principal Place of Business 395 ALHAMBRA CIRCLE, STE. 200 CORAL GABLES, FL 33134-5003	Mailing Address 395 ALHAMBRA CIRCLE, STE. 200 CORAL GABLES, FL 33134-5003
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01062004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0027330	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

DE ONA, JORGE VICTOR  
395 ALHAMBRA CIRCLE  
SUITE 200  
CORAL GABLES, FL 33134

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehashing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DE ONA, JORGE 395 ALHAMBRA CIR CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TV PEDROSO, JESUS 440 S.W. 23RD AVE. MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DE ONA, JORGE V 395 ALHAMBRA CIRCLE STE 200 CORAL GABLES, FL 33134
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000000002727  
01/13/04-80023-025 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 607, 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:  **JAN 8/2004** 305 442-1256  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #