

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # K13110

1. Entity Name
GARDEN LAKES INVESTMENTS, INC.



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**



01132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0027330	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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 reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DE ONA, JORGE
STREET ADDRESS	395 ALHAMBRA CIR
CITY-STATE-ZIP	CORAL GABLES, FL
TITLE	TV
NAME	PEDROSO, JESUS
STREET ADDRESS	440 S.W. 23RD AVE.
CITY-STATE-ZIP	MIAMI, FL
TITLE	S
NAME	DE ONA, JORGE V
STREET ADDRESS	395 ALHAMBRA CIRCLE STE 200
CITY-STATE-ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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01/25/06-80049-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: JORGE A. DE ONA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/19/06 305-442-1256
Date Daytime Phone #