

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L14253 (3)

1. Corporation Name

LOVE GARDEN INC.



Principal Place of Business

Mailing Address

2529 SW 8TH ST
MIAMI FL 33135

2529 SW 8TH ST
MIAMI FL 33135

3. Date Incorporated or Qualified
09/05/1989

3a. Date of Last Report
08/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt #, etc.

Suite, Apt #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

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4. FEI Number
65-0186469

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 has liability for intangible tax under s. 190.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ACOSTA, DORA
2529 SW 8TH ST.
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name JOSEPHINE HERNANDEZ
82 Street Address (P.O. Box Number is Not Acceptable)
2529 SW 8 ST
83 MIAMI FL
84 City FL 85 Zip Code 33130

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

Josephine Hernandez

JOSEPHINE HERNANDEZ Pres 8/6/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	ACOSTA, DORA	2529 SW 8TH ST.	MIAMI FL	☒
STD	ACOSTA, DORA	2529 SW 8TH ST.	MIAMI FL	☒
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
PD	JOSEPHINE HERNANDEZ	2529 SW 8 ST	MIAMI FL 33130	☒	☒	☐
STD	JOSEPHINE HERNANDEZ	2529 SW 8 ST	MIAMI FL 33130	☒	☒	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Josephine Hernandez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPHINE HERNANDEZ Pres.
8/6/96 642-6799

CR2E034 (3/96)