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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # L51363

(4)

SEYM									
VE 1111	OUR GARDNER REAL ESTA	ATE, INC.				 			
Principal Place	of Business	Mailing Address							(
10120 SW 1 7101 SW 10 MIAMI FL 33 US	OZNO AVE.	10120 SW 137 COURT 7101 SW 102ND AVE. MIAMI FL 33186 US				Date Incorporated or Qualified	3a. Date	of Last Re	eport
00		50				02/15/1990	()4/11/19	95
2. Principal Pla	ace of Business	2a. Mailing Address	-			4. FEI Number			Applied For
21		26				65-0178211		1	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State	9	City & State				6. Election Campaign Financing		\$5.06	D May Be
23		28				Trust Fund Contribution	□,		to Fees
Zφ	Country	Zip	Cour	ntry		8. This corporation has liability fo	r intang ble ta	ax under s	199.032,
24	25	29	30			Florida Statutes	s 🗖 No		
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New	Registered	Agent	
			-	1 18	Name				
GARDN	IER, LEONARD LEVI		-	82 5	Stroot Addre	ess (P.O. Box Number is Not Accepta	ahla)		
	SW 128 ST		l'	` ۵۰	Street Addre	355 (F.O. DOX HUITIDE IS NOT ACCEPTE	abio)		
	FL 33186		ļ.	83					
MINAMI	FL 33100		_						
			1	84 (City		FL	85 Zip	Code
familiar wit	ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	oa. Such change was authorize ion 607.0505, Florida Statutes	ea by the co	orpora	ation's board	a or airectors. I hereby accept the ap	pointment as	registerea	agent. 1 am
	Signature, typed or printed name of registered agent	and title if applicable (NO	T£ Registered A	Agent si	ignature required	when reinstating)	DATE		
12.	Signalure, typed or primed name or registered agent OFFICERS ANI	D DIRECTORS	T£ Registered /	Agent si		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12
						ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO Change	RS IN 12
12.	OFFICERS AND	D DIRECTORS	13.	LE		ADDITIONS/CHANGES TO OF	FICERS AND		
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certify that the information indicated on this annual report of 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 he receive for 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 appear of the corporation of the

SIGNATURE:

GNAYURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 30v-3/v-052