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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M51518

CID & SON GARDEN NURSERY INC.

FILED
Feb 06 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address			***************************************	**************************************	(B): 4:4:: 1981			
5130 S.W. 210 FT. LAUDERDA			v. 210th Terra Derdale fl 333					
						3. Date Incorporated or Qualified 05/05/1987	3a. Date of Las	•
2. Principal Pl	ace of Business	2a. Mailir	ng Address	,		4. FEI Number	1 0 1/00/ 100	Applied For
11		26				65-0002004	 	Not Applicable
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				5 Additional	
2		27				Certificate of Status Desired	Fee	Required
City & State	3	City &	State .			6. Election Campaign Financing	\$5.0	00 May Be
3		28				Trust Fund Contribution	☐ Add	ed to Fees
Zip	Country	Zip		Country	/	8. This corporation has liability for i		r s. 199,032,
1	25	29		30			Yes 🔀 No	
	9. Name and Address of Curre	ent Registered	Agent		Т	10. Name and Address of New Re	gistered Agent	
CID,	, rigoberto			81	Name	\mathcal{A}_{i}		
513	0 S.W. 210TH TERRACE			82	Street Add	iress (P.O. Box Number is Not Acceptab	le)	
FT.	LAUDERDALE FL 33332						-	
			•	83				
				84	City		lee 7	ip Code
				64	City		FL 85 2	лр соов
	Signature: typey ix printed hand of registered a				ent signature requ	ired when reinstating)	DATE	
12,		IND DIRECTORS		13.	····	ADDITIONS/CHANGES TO OFFICE		
TITLE	PTD		DELETE	1.1 TITLE			L Chan	ge 🔲 Additio
AME	CID, RIGOBERTO			1.2 NAME				
TREET ADDRESS	5130 SW 210TH TER			1.3 STAEE	T ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 CITY-	ST-ZIP			
ITILE	SVD		DELETE	2.1 TITLE			Chan	ge 🔲 Additio
NAME	CID, AMPARO			2.2 NAME				
STREET ADDRESS	5130 SW 210TH TER				T ADDRESS			
ITY-ST-ZIP	FT. LAUDERDALE FL		DELETE	2. 4 CITY	ST-ZIP		S Z 65	and the same
TITLE	AT-V/		☐ DEL€TE	3.1 TITLE		VP	Chan	ge Additie
IAME	BLOCK, MICHAEL			3.2 NAME				
STREET ADORESS	830 NE 18 ST			1	T ADDRESS			
ITY-ST-ZIP	FT LAUDERDALE FL		DELETE	3.4. CITY-	ST-ZIP		Chan	ge Addition
ITLE			☐ DELETE				CHAIL CHAIL	וויסטא ויייד בא ^ו
IAME				4. 2 NAMI				
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP LITLE			DELETE	4.4 CITY- 5.1 TITLE	SI - ZIP		Chan	ge Additi
IAME			E- PACEIL	5.2 NAME			LJ Vikin	المالين مو
STREET ADDRESS					T ADDRESS			
Į į	18			5.4 CITY-				
CITY - ST - 7IP TITLE			DELETE	61 TITLE	31° £IF		Chan	ae 🔲 Additi
AME				6.2 NAME			المال لي	- <u> </u>
STREET ADDRESS					T ADDRESS			
					i i			
CITY-ST-2IP				6.4 CITY -	21-21			,

14. I do 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 receiver 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 charged, or on an attachment with an adverse.

Daytime Phone #