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Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N05192** (2)

1. Corporation Name

FRIENDS OF THE JAPANESE GARDEN, INC.



Principal Place of Business C/O MS. AGNES YOUNGBLOOD 4688 MERIDIAN AVE. #1001 4 MIAMI BEACH FL 33139 US	Mailing Address C/O MS. AGNES YOUNGBLOOD 1688 MERIDIAN AVE. #1001 MIAMI BEACH FL 33139 US
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3. Date Incorporated or Qualified 09/17/1984
4. FEI Number 59-2616203
Applied For ☐
Not Applicable ☐

2. Principal Place of Business 21 407 Arthur Godfrey Rd. Miami Beach 33140	2a. Mailing Address 28 407 Arthur Godfrey Rd. Miami Beach 33140
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Miami Beach Fla.	City & State 28 Miami Beach, Dade, Fla.
Zip 24 33140	Country 25 USA
Zip 29 33140	Country 30 USA

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent YOUNGBLOOD, AGNES 2333 BRICKLELL AVE UNIT 417 MIAMI FL 38129	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

10. Name and Address of New Registered Agent	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	YOUNGBLOOD, AGNES	1.2 NAME	
STREET ADDRESS	2333 BRICKELL AVE., #417	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	STIEGER, CONSTANCE	2.2 NAME	
STREET ADDRESS	7400 S.W.L 63RD AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	TD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GEORGES, WILTRUD	3.2 NAME	
STREET ADDRESS	920 NE 121ST ST. APT. B	3.3 STREET ADDRESS	
CITY-ST-ZIP	BISCAYNE PARK FL 33161-6454	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: 9/12/98 3/1/98 305-538-2121

CR2E037 (10/97)