


FILE NOW: FILING FEE IS \$61.25

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May 20 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000002622 (6)**

1. Corporation Name

**EDEN NOW ECOLOGICAL INSTITUTE, INC.**

Principal Place of Business

Mailing Address

25650 S.W. 197TH AVENUE  
C/O ANDRES MEJIDES  
HOMESTEAD FL 33031

25650 S.W. 197TH AVENUE  
C/O ANDRES MEJIDES  
HOMESTEAD FL 33031-1611



3. Date Incorporated or Qualified  
**05/10/1996**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

Applied For

**65-0693388-11200**

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing

☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLASSBERG, DAVID M ESQUIRE  
1450 MADRUGA AVENUE, SUITE 302  
CORAL GABLES FL 33146

81 Name

**YVONNE MEJIDES**

82 Street Address (P.O. Box Number is Not Acceptable)

**18821 S.W. 309TH STREET**

83

84 City

**HOMESTEAD**

FL

85 Zip Code

**33030**

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

*Andres Mejides*  
Signature, typed or printed name of registered agent and time if applicable

(NOTE: Registered Agent signature required when reinstating)

**5/12/97**  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**CEO  
MEJIDES, ANDRES  
25650 S.W. 197TH AVENUE  
HOMESTEAD FL 33031**

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
**Director - President** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VTD  
MEJIDES, YVONNE  
18821 S.W. 309TH STREET  
HOMESTEAD FL**

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
**HOMESTEAD, FL 33030** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DP  
WINTER, DIANE  
8801 S.W. 127TH STREET  
MIAMI FL 33156** ☒ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DVS  
HOWE-MEJIDES, CYNTHIA  
25650 S.W. 197TH AVENUE  
HOMESTEAD FL 33031**

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
MEJIDES, ANDRES  
25650 S.W. 197TH AVENUE  
HOMESTEAD FL 33031**

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP  
**Director - Vice President** ☐ Change ☒ Addition  
**Michael Tucker**  
**11747 S.W. 99th AVE**  
**MIAMI, FL 33186**

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

SIGNATURE:

*YVONNE MEJIDES*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

**5/12/97**

**305 342-9495**  
Daytime Phone # 0024181

CR2E037 (9/96)