1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N98000000815

1. Corporation Name

GARDENS ESTATE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

111 SW 3RD STREET SUITE 600 MIAMI FL 33130

111 SW 3RD STREET SUITE 600

MIAMI FL 33130

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90188 018 ****61.25



2. Principal Pl 21 /442	ace of Business 20	la. Mailing Address 14425 COV)	My WALK DE	3. Date Incorporated or Qualifed 02/11/1998	/
Suite, Apt.		Suite, Apt. #, etc.		4. FEI Number	✓ Applied For
22	2	7			Not Applicable
City & State	11 FL 33186 21	City & State M/AW/ FL		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
Zip	Country	Zipt - 17/	Country	6. Election Campaign Financing	\$5.00 May Be
24 33186	25 W/AN/1/)4/)9/2	9 33/86 30	MIAM - ISAS	Trust Fund Contribution	Added to Fees
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					Agent
81 Name KA				(L SCHULER	
HARRIS, ELLIOTT			82 Street Addr	ess (P.O. Box Number is Not Acceptable) S. BISCAYNE BIVA	
111 SW 3RD STREET SUITE 600				1/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/	
MIAMI FL 33130 20 th				the Floor	
			84 City MIA	m/ FL FL	85 33531
11. Pursuant to the provisions of Sections 617-9502 and 617-1506. Plorida 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 Signature, typed or printed name of registered Signature and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DP	₽ DELETE	1.1 TITLE	2.5	Change Addition
NAME	HARRIS, ELLIOTT		1.2 NAME	ICHAEL GARCIA CA	
STREET ADDRESS	111 SW 3RD STREET SUITE 600		1.3 STREET ADDRESS / 47	1425 COUNTIZY WAIK DY	11/2
CITY-ST-ZIP	MIAMI FL 33130			MIAMI FL 3318	6/
TITLE	DS DS	DELETE	2.1 TITLE	5	Change Addition
NAME	GARCIA, LIZA	,	2.2 NAME	TRLJ. SCHUMETZ	/
STREET ADDRESS	111 SW 3RD STREET SUITE 600		2.3 STREET ADDRESS 2	00 SO. BISCAYNER	(VD, /
CITY-ST-ZIP	MIAMI FL 33130		2.4 CITY-ST-ZIP M	ANI FL 33131	
TITLE	DT	DELETE	3.1 TITLE	T	Change
NAME	CAINZOS, ROGELIO		32 NAME	Ainzos, Rogello	(
STREET ADDRESS	111 SW 3RD STREET SUITE 600		3.3 STREET ADDRESS 111	I SW BD ST. SUITE	z 600
CITY-ST-ZIP	MIAMI FL 33130		3.4, CITY-ST-ZIP	HAMI FL 33150	
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		ļ
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	,	ļ
STREET ADDRESS			6.3 STREET ADDRESS	•	
CITY OT ZID			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 of the certification of the certification of the corporation of the corporation of the corporation of the certification of the corporation of the corporation of the corporation of the corporation of the certification of the corporation of the corporation