

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000033444

FILED
Sep 12, 2008
Secretary of State

Entity Name: GAITA GARDENS 1254 AND 1260 NW 59TH STREET CORP.

Current Principal Place of Business:

407 LINCOLN ROAD
SUITE 312
MIAMI BEACH, FL 33139 US

Current Mailing Address:

407 LINCOLN ROAD
SUITE 312
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

1666 KENNEDY CAUSEWAY
400
NORTH BAY VILLAGE, FL 33141 US

New Mailing Address:

1666 KENNEDY CAUSEWAY
400
NORTH BAY VILLAGE, FL 33141 US

FEI Number: 33-1214404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAIME, VIVIAN A ESQ
555 NE 15TH STREET
SUITE 100
MIAMI BEACH, FL 33132 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GAITA, SAMUEL A
Address: 407 LINCOLN ROAD SUITE 312
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: S () Delete
Name: GAITA, SAMUEL A
Address: 407 LINCOLN ROAD SUITE 312
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: T () Delete
Name: GAITA, SAMUEL A
Address: 407 LINCOLN ROAD SUITE 312
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: D () Delete
Name: GAITA, SAMUEL A
Address: 407 LINCOLN ROAD SUITE 312
City-St-Zip: MIAMI BEACH, FL 33139 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL A GAITA

PSTD

09/12/2008

Electronic Signature of Signing Officer or Director

Date