SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE **ORPORATION** FILED Sandra B. Mortham ANNUAL REPORT -Secretary of State .-1996 DIVISION OF CORPORATIONS 96 SEP -6 AM 8: 40 DOCUMENT # P93000076210 (2) SECRETARY OF STATE TALLAHASSEE, FLORIDA JM GARDEN APARTMENTS, INC. Principal Place of Business Mailing Address 4521 SW 34TH AVE 4521 SW 94TH AVE FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312 3. Date Incorporated or Qualified 3a. Date of Last Report 10/29/1993 07/06/1995 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 26 65-0458132 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 0410 DIJON, BILL 82 Street Address (P.O. Box Number is Not Acceptable) 407 LINCOLN RD. 45215W 34 STE. 5B 83 MIAMI BEACH FL 33139 CIVF.T. LAUDER DALE Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITI F DELETE PD 1.1 TITLE Change Addition NAME TORO, JULIO 1.2 NAME STREET ADDRESS 4521 SW 34TH AVE 1.3 STREET ADDRESS FT LAUDERDALE FL 33312 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME 400001956304 STREET ADDRESS 3 3 STREET ADDRESS -09/25/96--01051--026 ****225 DÜ Change Addit CITY-ST-ZIP 3.4. CITY - ST - ZIP <u>****225.00</u> TOLE 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** 6.4 CITY - ST- ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attackment with an address

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

0078120