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Feb 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000085471 (9)

1. Corporation Name
GARDEZ CORPORATION

Principal Place of Business

113 CHERRY CREEK CIRCLE
SUITE 400
WINTER SPRINGS FL 32708
US

Mailing Address

113 CHERRY CREEK CIRCLE
SUITE 400
WINTER SPRINGS FL 32708-6174
US



2. Principal Place of Business

21 11062 Topeka Place

Suite, Apt. #, etc.

22 City & State
Cooper City, Florida

23 Zip
33026

24 Country
USA

2a. Mailing Address

26 11062 Topeka Place

Suite, Apt. #, etc.

27 City & State
Cooper City, Florida

28 Zip
33026

29 Country
USA

3. Date Incorporated or Qualified
12/08/1993

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0467227

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$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

OTTERO & MULLIN, P.A.
75 VALENCIA AVE.
SUITE 400
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME CILIMBERG, ISABEL E
STREET ADDRESS 10620 PARIS ST
CITY-ST-ZIP COOPER CITY FL

TITLE DVS
NAME CILIMBERG, R GLENN
STREET ADDRESS 10620 PARIS ST
CITY-ST-ZIP COOPER CITY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME CILIMBERG, ISABEL E.
1.3 STREET ADDRESS 11062 Topeka Place
1.4 CITY-ST-ZIP Cooper City, FL 33026

2.1 TITLE DVS
2.2 NAME CILIMBERG, R. Glenn
2.3 STREET ADDRESS 11062 Topeka Place
2.4 CITY-ST-ZIP Cooper City, FL 33026

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

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

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE: R. Glenn Cilimberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-03-97

Date Daytime Phone #

CR2E034 (9/96)