FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000086222 (5)

S & D SEVILLA GARDENS, INC.

FILED May 04 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address		 -		
13707 SW 91ST CT., #B		13707 SW 91ST CT., #B	13707 SW 91ST CT., #B			
MIAMI FL 33176		MIAMI FL 33176			DO MOT MOITE IN THIS COLOR	
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	\neg
					12/16/1993	
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number Applied For	\dashv
21		26	26		65-0461822 Not Applical	ole
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional	
City & State		City & State	City & State		Fee Required	_
23	•	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count	ry	This corporation owes or has paid the current year Intangible	\dashv
24			0		Personal Property Tax due June 30. Yes XX No	
		Current Registered Agent			10. Name and Address of New Registered Agent	
	J ng , ESO., Gwynne a		8	1 Name		
CARLTON FIELDS			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)	\dashv
	E HARBOUR PLACE		8:			_
IAN	MPA FL 33602		0.	3		
			6	4 City	FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 6	07.0502 and 607.1508. Florida Statutes	the abo	ve-named core	poration submits this statement for the ourpose of changing its registers	, d
office or re	eaistered agent, or both, in th	e State of Florida. Such charige was au e obligations of, Section 607.0505, Flori	thorized b	by the corporat	alion's board of directors. I hereby accept the appointment as registered	i
SIGNATURE	· · ·	e exprigements of coertion box today, plant	aa olalal	00.		
SIGNATURE .	Signature, lyped or posted name of rege		Registered A	gent signature requi	ried when reinstating) DATE	- - -
12.	OFFICE	RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CHANEY, SUZANNE E	L DELETE	1.1 TITLE] Change Additi	on 3
NAME CHANEY, SUZANNE E STREET ADDRESS 13707 S.W. 91 COURT #B		#R	1.2 NAME			
CITY-ST-ZIP	MIAMI FL 33176	#0	1.3 STREET ADDR 1.4 City-St-Zip			
TITLE	VPST	☐ DELETE	2.1 TITLE		☐ Change ☐ Additi	ᇑ
NAME	MCCLURE, DEDE		2.2 NAM	<u> </u>	· -	
STREET ADDRESS	5480 KEITHWOOD CT.		2.3 STREE	et address		-
CITY-ST-ZIP	CUMMING GA 30130		2.4 CITY-ST-ZIP			_
TITLE			3.1 TITLE		Change Additi	on
NAME			3.2 NAME			1
STREET ADDRESS				ET ADDRESS		
TITLE		DELETE	3.4. CITY 4.1 TITLE		☐ Change ☐ Additi	00
NAME		_ other	4. 2 NAM		C Ollarige	"
STREET ADDRESS			II.	T ADDRESS		
CITY-ST-ZIP			4.4 CITY	i		
TITLE		☐ DELETE	5.1 TITLE		Change Additi	on
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-			_
TITLE		☐ DELETE	6.1 TITLE		Change Additi	on
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			6.4 CITY	S1-ZIP	0 - 1 - 440 07/07/0 Final - 0 - 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	

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 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 any attachment with an address.