## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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FILED PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 98 FFB -9 PM 1:25 1997 DIVISION OF CORPORATIONS DOCUMENT # P94000021111 (7) SECRETARIA OF STATE TALLEMASTEE, FLORIDA GARDEN PLAZA, INC. Principal Place of Business Mailing Address 1780 MARSEILLE DR 1760 MARSEILLE DR. MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 03/18/1994 07/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0477773 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes □ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MURPHY, MARIA E 8610 S.W. 21ST ST. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33155 83 84 City 85 Zip Code 11. Pursuant to the provisions of Section 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, fulle 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 action for the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

2/3/68 SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 IRECTORS 13. (4/97 ITLE DELETE 1.1 TITLE Change Addition MURPHY, MARIA E ANAF 1.2 NAME 8610 S.W. 21ST ST. STREET ADDRESS 400002426754-1.3 STREET ADDRESS -02/10/98--01059--007 \*\*\*\*900.00 \*\*\*\*\*\*900.00 MIAMI FL 33155 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE AGUILERA, ROSALINA NAME 2.2 NAME 8810 S.W. 21ST ST. STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33155** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition 3.2 NAME 47-98 1-1-as STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP REINSTAT Addition TITLE ☐ Change NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 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 eath; that I am an officer or director of the copporation 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 iveranged, or on an attactument with an address.