

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000045508 (6)

1. Corporation Name

SFA JADE GARDENS, INC.



Principal Place of Business

8200 SOUTH DADELAND BLVD.
SUITE 609
MIAMI FL 33156

Mailing Address

8200 SOUTH DADELAND BLVD.
SUITE 609
MIAMI FL 33156

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

KEY CORPORATE SERVICES INC.
200 SOUTH DISCAYNE BLVD.
FIRST UNION FINANCIAL CTR., 20TH FLOOR
MIAMI FL 33131

3. Date Incorporated or Qualified

06/15/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0500722

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

10. Name and Address of New Registered Agent

81 Name

Syrie Ortiz

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

9095 SW 87 Ave St. 777

83

84 City

Miami

FL

85 Zip Code

33176

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

PD

DELETE

NAME

SPIELMAN, ROBERT E

STREET ADDRESS

9200 DADELAND BLVD 609

CITY - ST - ZIP

MIAMI FL

TITLE

VSD

DELETE

NAME

MITCHELL, JAMES R

STREET ADDRESS

9095 SW 87TH AVE 777

CITY - ST - ZIP

MIAMI FL

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

700001838367

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4/9/96 305-271-5051

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