

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 # **P94000048406 (0)**

1. Corporation Name

FLORIDA LAND ENTERPRISES, INC.

Principal Place of Business

**3795 N.W. SOUTH RIVER DR.
MIAMI FL 33142**

Mailing Address

**3795 N.W. SOUTH RIVER DR.
MIAMI FL 33142**



2. Principal Place of Business

21 **2910 Golden Gate Blvd.**

Suite, Apt. #, etc.

22

City & State

23 **Naples Fl. 33964**

Zip

Country

24

2a. Mailing Address

26 **2910 Golden Gate Blvd.**

Suite, Apt. #, etc.

27

City & State

28 **Naples, Fl. 33964**

Zip

Country

29

30

3. Date Incorporated or Qualified

06/24/1994

3a. Date of Last Report

05/01/1995

4. FEF Number

65-6151164

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

**PARDO, PEDRO F
3795 N.W. S. RIVER DR.
MIAMI FL 33142**

10. Name and Address of New Registered Agent

81 Name

PEDRO PARDO

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

2910 Golden Gate Blvd.

83

84 City

Naples,

FL

85 Zip Code

33964

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 (date of registration or filing if applicable)

Pedro F. Pardo

04/25/96

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **PARDO, PEDRO**
STREET ADDRESS **3795 N.W. S. RIVER DR**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **PD.** ☒ Change ☐ Addition
12 NAME **PARDO, PEDRO**
13 STREET ADDRESS **2910 Golden Gate Blvd**
14 CITY-ST-ZIP **Naples, Fl. 33964** ☐ Change ☐ Addition

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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

President

04/25/96

DATE

CR2E034 (12/95)