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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000092748 (0)

GARDENETTE PROPERTIES, INC.

Principal Place of Business 551-9. MILITARY TRAIL -WEST PALM DEACH FL 00415

2. Principal Place of Business

Mailing Address

2a. Mailing Address

551 S. MILITARY TRAIL WEST PALM BEACH FL-93415

## **FILED** Feb 18 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified 12/23/1994

4. FEI Number

21 4524 GUN CLUB	ROAD 26	4524 GUN	CLUB I	ROA	.D	65-06646	85		No.	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of S	Status Desired	×	\$8.75	
22 SUITE 101	27	SUITE 101				a. Certificate of C	naius ocsiieu	<i>-</i>	Fee Re	
City & State		City & State				6. Election Camp			\$5.00	
23 WEST PALM BEAC		WEST PALM			FL.	Trust Fund Co			Added	
——¬ ' ├¬	Country	Zip	<u> </u>	ıntry		8. This corporation	•	_		
24 33415 25	USA 29 Address of Current Regis	33415	30	<u>ַ</u> <u>ט</u>	SA	10. Name and Ad	erty Tax due Jun			J No
		ieles Ageill		81	Name	10, Name and Ac	Olds Oliven	ogistor su p	- Gotte	
THOMPSON, DOL				Ш						····
4524 GUN CLUB SUITE 101	DHIVE			82	Street A	Address (P.O. Box Number	er is Not Accepte	able)		
WEST PALM BEA	CU EL 22446			83						
WEST FALM DEAT	UTI PL 33413									
				84	City			FL	85 Zip	Code
11. Pursuant to the provisions	of Sections 607 0502 and 6	07 1508 Florida State	itos the el	hove.	named	corporation submits this s	tatement for the		changing it	e registered
office or registered agent.	or both, in the State of Florid	da. Such change was	authorizo	d by						
	ind accept the obligations of	ection 607,0505, F			C 17	THOMPSON		01/2	2/02	
SIGNATURE Slipsulate types or prin	nted subjected rogetered argoritanial libe	If around within INC		_		required when reinstating)	· · · · · · · · · · · · · · · · · · ·	01/28	9/ 90	
12.	OFFICERS AND DIREC		13.				ANGES TO OFF			S IN 12
TITLE DPS		DELETE	1.1 Tf	TLE					Change	Addition
NAME STALUPPI,	JOHN		1.2 N/	AME						
STREET ADDRESS 661 S. MILE			1351	REET A	ADDRESS	4524 GUN CLUE	ROAD s	te 101		
CITY-ST-ZIP WEST-PALM	A BEACH FL 99415		1.4 Cf	TY-ST	- ZiP	WEST PALM BEA				
TITLE		DELETE	2.1 70	TLE					Change	Addition
NAME			2.2 N	AME	[					
STREET ADDRESS			2.3 \$1	REET A	DDRESS					
CITY-ST-ZIP			2 4 0	ITY-SI	r- ZIP				_	
TITLE		DELETE	3.1 Tr	TLE					Change	Addition
NAME			3.2 NA	<b>AME</b>	- !					
STREET ADDRESS			3.3 St	REET A	DORESS					
CITY-ST-ZIP			3 4. C	ITY-ST	- 210					
TITLE		DELETE	4 1 Ti	7LE					Change	Addition
NAME			4. 2 N	IAME	-					
STREET ADDRESS			4.3 \$1	INEET A	udd <del>r</del> ess					
CITY-ST-ZIP			4.4 CI	TY-ST	- ZIP					
TITLE		DELETE	5.1 (	TLE					Change	Addition
NAME			5.2 N/	AME	j					
STREET ADDRESS			5.3 ST	TAFET A	ODAESS					
CITY-ST-ZIP		<del></del>		TY-ST	-ZIP					
TITLE		DELETE	6 1 Tr	TLE	-7				Change	☐ Addition
NAME			6.2 N	AME						
STREET ADDRESS			6351	TREET A	ADDRESS					
CITY-ST-ZIP	<del></del>			TY-ST		<u></u>				
14. I hereby certify that the infe	ormation supplied with this f sport or supplemental annua	iling does not qualify	for the exe	empti	on state	d in Section 119.07(3)(i),	Florida Statutes.	I further cer	tify that the	information

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

JOHN STALUPPI.

SIGNATURE:

PRESIDENT

01/28/98

(561) 689-0552