2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

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DOCUMENT # P95000021233

1. Entity Name

GMH/GARDEN SHOPS AT BOCA, INC.



Principal Place of Business

1541 SUNSET DR. SUITE 300

CORAL GABLES, FL 33143

Mailing Address

1541 SUNSET DR.

SUITE 300

CORAL GABLES, FL 33143



04 APR 29 AM 9: 25

SECHETARY OF STATE TALLAHASSEE, FLORIDA



02122004

No Chg-P

CR2E034 (10/03)

4.	FEI Number
	65-0638226

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and	Address of	Current	Registered	Agent

HIGIER, GERALD M 1541 SUNSET DR. SUITE 300 CORAL GABLES, FL 33143

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 The above named entity submits this statement for the p the obligations of registered agent. 		t, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	<u> </u>	200035556692 <u>\$/</u> 96/9491919015_**676.25_
FILE IIDWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Added to Fee	Be · ·

10. OFFICERS AND DIRECTORS TITLE NAME HIGIER, GERALD M STREET ADDRESS 1541 SUNSET DR., STE. 300 CITY-ST-ZIP CORAL GABLES, FL 33143 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.