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

CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # P95000041022 (1)

GULFSTREAM TROPICAL NURSERY, INC.

Principal Place of Business

2048 THOMAS ST

Mailing Address

2048 THOMAS ST

FILED Apr 09 1997 8:00am Secretary of State



0127160

HOLLYWOOD I	FL 33020		HOLLY	HOLLYWOOD FL 33020-2133								
							_	3. Date Incorporated or Qualified				
2. Principal P	lace of Busin	ess	2a. Mai	2a. Mailing Address					4. FEI Number			Applied For
21			26	26				l	65-0585910			Not Applicable
Suite, Apt.	#, etc.		Suit 27	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional Required
City & Stati	NO		- - 1	City & State				6. Election Campaign Financing	<u></u>	\$5.00 May Be		
23		Country	28		T - 0-				Trust Fund Contribution	<u> </u>		d to Fees
- 2 π 	}	25	Zip		Country		}	This corporation has liability for intangible tax under s. 199.032, Florida Statutes No				
4		and Address of Curre	ni Benisterer	1 Agent	30	Τ			Florida Statutes 10. Name and Address of New Re			
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	O HOLLYWO		ļ	(140716					
		OOD BEAD		82 Street Ad			\ddress	(P.O. Box Number is Not Acceptab	ole)			
	TE 201	51 00000				63						
TUL	TAMOOD E	-L 33020				63						
				•		84	City			FI	85 Zi	p Code
office or r	registered ag im familiar wit	ent, or both, in the State th, and accept the oblig or proted name of registercolars	e of Florida. S gations of, Soc	uch change was ction 607.0505, F	authorize lorida Stat	d by tutes	the corp	oration	tion submits this statement for the p is board of directors. I hereby acception	ot the app	ointment i	is registered
12.		OFFICERS AN			13.			· vqanaa	ADDITIONS/CHANGES TO OFFIC		DIRECTO	DRS IN 12
TITLE	D			DELETE	1.1 Ti	TLE					Change	
NAME	MCDONO	UGH, WILLIAM			1.2 N		1					
STREET ADDRESS	2048 THC				- 6		ADDRESS					
City - St - ZIP	HOLLYWO	OOD FL 33020					i					
TIPLE	D			DELETE	2.1 Ti	TLF	1-21				Change	Addition
NAME	BAGBY, C	GREG			22 N		Į					. (
l	2048 THC											
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NAME	ĺ				6.2 N	ame	İ					
STREET ADDRESS					63 ST	TREET	ADDRESS					
CHY-SI-ZIP	}	ς.			6.4 CI	ITY-S	T-ZIP					
14. Ldo herek	by certify that	the information supplie	d with this file	ng does not qual	lify for the	exe	motion st	ated in	Section 119.07(3)(i), Florida Statute	s. I furthe	certify th	at the
intormatio Lam an of appears i	in Indicated c ifficer or direct in Block 12 or	on this annual report or stor of the corporation of r Block 13 if changed, o	supplemental or the receive or on an attack	annual report is for trustee empor inment with an ad	true and a wered to a ldress.	exec exec	rate and t ute this re	tnat my aport as	signature shall have the same lega s required by Chapter 607, Florida S	l effect as itatutes; a	it made und that my	inder oath, th / name