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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000059831 (4)

MYSTREES GARDENS CENTER, INC.

Principal Place of Business

Mailing Address

3210 60TH STREET SW NAPLES FL 33999 3210 60TH STREET SW NAPLES FL 34116-7413

FILED Mar 10 1997 8:00am Secretary of State



NAPLES FL 33999		NAPLES FL 34116-7413							
						3. Date incorporated or Qualified 08/01/1995	3a. Date of 04/19/19		ort
2. Principal Plac 21 32/0	<u>-</u> .	2a. Mailing Address				4. FEI Number 65-0602563		·····	ied For Applicable
Suite, Apt #,		Suite, Apt. #, etc.				5. Certificate of Status Desired		.75 Ad	ditional
City & State 23 MAPL	Es	City & State			****	Election Campaign Financing Trust Fund Contribution		5.00 M	
7ip 🕟. 34	11/6 Country Coulter	Ζφ 29	30 Co.	intry		8. This corporation has liability for a Florida Statutes	ntangible tax u Yes \(\square\) No		99.032,
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered Agent		
	NEZ, ABELARDO			B1 Na	$^{\sf me}{\sf M}$	ARTTHEL, AG	BELARI	Q C	
	MBER LAKE CIR			82 Str	egt Addre	ess (P.O. Box Number is Not Acceptab	le)		
	B APT 102			83	3210	60TH ST SU	<i>)</i>		
NAPLES	5 FL			03					
				84 Cit	V NA	PLES	FL 85	Zip Co	de 6-74/3
11, Pursuant to office or reg agent. Lare SIGNATURE	().(Thelarelo	arten	١~	_		oration submits this statement for the poor's board of directors. I hereby accept	urpose of chan ot the appointm	ging its reent as re	egistered gistered
हात्	program placed or purpled name of registered agent OFFICERS AND		Regirere 13.	d Agent sign	ature require	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	CTORS	IN 12
12. TITLE D		DELETE	1,1 11	TI F		ADDITIONS/CHANGES TO OFFIC	THE PARTY OF THE P	hange	Addition
" "	MARTINEZ, ABELARDO		1.2 N			1° "			
	220 TIMBER LAKE CIR, BLDG B	APT 102	1.3 \$	TREET ADDR	ESS				
	NAPLES FL 34116		1.4 0	ITY-ST-ZIP]				
	YST	DELETE	2.1 TO	TLE	T T		C	hange	Addition
	MARTINEZ, MARIA A		2.2 N	ame					
	210 60TH ST SW		2.3 \$	TREET ADOR	ESS				
	NAPLES FL 341/6	☐ DELETE	2 4 C	ITY-ST-ZIP			С	hange	Addition
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NAME			4.21	AME					
STREET ADDRESS				TREET ADDR	ESS				
CITY-ST-ZIP		□ DELETE		ITY - ST - ZIP			110	hange	Addition
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NAME CEDEST ADDOLOS			5.2 N	ami: Treet addr	rec				
STREET ADDRESS CITY- ST-ZIP				INEET ALJUN ITY-ST-ZIP	Lod				
THE THE		DELETE	5.4 C				□ C	hange	Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET ADDR	ESS				
CITY-ST-7IP			6.4 C	ITY-ST-ZIP					

14. I do 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 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 applicational with an address.

SIGNATURE

SCHALDHE AND TYPED OR PRINTED NAME OF SKINING OFFICERCOR DIRECTOR

2-20-97

Daytime Phone #