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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000062519

NEWGARDEN SALEM CORP.

Principal Plac	ce of Business

4811 I8SLAND POND COURT SUITE 1003 BONITA SPRINGS FL 39323 Mailing Address

4811 I8SLAND POND COURT SUITE 1003

BONITA SPRINGS FL 39323

## FILED Jan 28, 1999 8:00am Secretary of State

01-28-1999 90063 003 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

1 - 19 - 2 - 1		<b>.</b>					Ī	3. Date Incorporated or	r Qualifed .			
1975 e	,						08/14/1995	,		. ,		
2. Principal P	lace of Bus	ness	2a. I	Mailing Address				4. FEI Number	· · · · · · · · · · · · · · · · · · ·	I A	oplied For	
21	:		26	•				65-0602395		N	ot Applicable	
Y Suite, Apt.	#, etc.			Suite, Apt. #, etc.				\$8.75 Additional				
22	7		27					5. Certifcate of Status I	Desired	•	equired	
E. City & Stat	e (	** 5 JULY 12 12	<u> </u>	City & State				6. Election Campaign Financing \$5.00 May Be				
23			28	•				Trust Fund Contribution				
Zip		Country	7	Zip · Country				8. This corporation owes the current year Intangible				
24		25	30	5		Personal Property Tax. ☐ Yes ☐ No			□No			
Name and Address of Current Registered Agent							•	10. Name and Address	of New Registered	d Agent		
·. · <u></u>		17 为《礼】3。《清·周	Y	13 (2)	81	Name				•		
		TEPHEN R			82	- Ctroot	Addross	o (D.O. Boy Number is N	ot Accontable)	•		
		POND COURT		02	82 Street Address (P.O. Box Number is Not Acceptable)							
	E 1003				83			45 (44.1)	ON BUTAN	11111111	10° 11811 1181	
BON	ita sprin	IGS FL 34134					<del></del>				10.1 41 121	
· · · · · · · · · · · · · · · · · · ·					84	City			FI	85 Zip	Code	
11. Pursuant	to the provi	sions of Sections 607.0502	and 607	7.1508, Florida Statutes.	the above	-named	corpora	ation submits this stateme	ent for the purpose of	f changing its	registered	
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. Earn familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
•	an reminied V	and accept the obligation	113 01, 3	Jacada dur Vaga, Fiorius	a Statutes.	•	•		<u>.</u>			
SIGNATURE	Signature, type	or printed name of registered agent a	nd title if a	applicable. (NOTE: Re	gistered Agent	t signature r	required wh	hen reinstating)	~ DATE	<u> </u>		
12.	. 41	OFFICERS AND			13.			ADDITIONS/CHANGE	S TO OFFICERS A	ND DIRECTO	DR\$ IN 12	
TITLE	D			☐ DELETE	1.1 TITLE			Section of the Section		☐ Change	☐ Addition	
NAME	TRANOV	ich, stephen r			1.2 NAME				5=			
STREET ADDRESS		LAND POND COURT, #	1003		1.3 STREET	ADDRESS						
CITY-ST-ZIP		SPRINGS FL			1,4 CITY-ST			. 1	or the state of th		. (	
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4. 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 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, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/99 941 495 5376
Date Daytime Phone #

CR2E034 (11/98)