## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS . \*\*

1996 ·

DOCUMENT # P95000093399 (0) PUDER HOMES AT THE GROVE POD D, INC.



	of Business	Mailing Address				
7200 WEST CA BOCA RATON	amino real blvd. Ste 104 Fl 33433	7200 WEST CAMINO REI BOCA RATON FL 33433	al blvd. Ste	104		
					3. Date Incorporated or Qualified 12/08/1995	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		<del></del>	4. FEI Number	Applied For
21		26			5-0520371	Not Applicabl
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Crty & State	<u> </u>	City & State			6. Election Campaign Financing	\$5.00 May Be
23	,	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	,	B. This corporation has liability for in Florida Statutes  Yes	
24	25	29	30		Florida Statutes Yes  10. Name and Address of New Re	
	9. Name and Address of Curre	ent Hegistered Agent	B1	Name	TO. Harrie and Address of Non-Tite	- Biorono regarie
מומכם ו	MOUNTE				D. Al. J. S. Al-A Assessable	a
アリジセド, I	MICHAEL S IST CAMINO REAL BLVD. STE :	104	82	82 Street Address (P.O. Box Number is Not Acceptable)		li I
	ATON FL 33433	דעו	83			
DOGICIA	/	1	84	City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.05	12 nd 607.1508, Florida Statut	es, the above	named corpor	ration submits this statement for the purp	oose of changing its registered offi
or register familiar wi	red agent, or octur, if the State of the th, and accept the obligations of Sec	ction 607.0505, Florida Statutes	i.	Jordiion a Düd	ration submits this statement for the purp ard of directors. I hereby accept the appo	
SIGNATURE	1 Style	<u> </u>				DA <sup>T</sup> E
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40				int signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFI	
12.	OFFICERS A	on and trie if applicable (NC ND DIRECTORS	TE Registered Age 13. 1.1 TITLE		ed when reinstating! ADDITIONS/CHANGES TO OFFI	
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Too nereby definition that the information indicated on the annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on the annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 by an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/96

(407) 362-4111 ....