

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000058011 (3)

1. Corporation Name

GARDENIA INVESTMENTS INC.

Principal Place of Business

Mailing Address

~~3174 TAMiami TRAIL EAST~~
SUITE 1
NAPLES FL 33962

~~3174 TAMiami TRAIL EAST~~
SUITE 1
NAPLES FL 33962

FILED

98 JUL -6 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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DO NOT WRITE IN THIS SPACE

06/05/98 0013--001

3. Date Incorporated or ~~06/05/98~~ 07/04/1996

07/04/1996

4. FEI Number 65-0846950

Applied For

APPLIED FOR

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 9955 Tamiami Trail North

2a. Mailing Address

26 9955 Tamiami Trail North

Suite, Apt. #, etc.

22 Suite 3

Suite, Apt. #, etc.

27 Suite 3

City & State

23 Naples, FL

City & State

28 Naples, FL

Zip

24 34108

Country

25 USA

Zip

29 34108

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RIDDLE, MELINDA P

-- 3174 EAST TAMiami TRAIL
SUITE #1
NAPLES FL 33962

81 Name RIDDLE, MELINDA P.

82 Street Address (P.O. Box Number is Not Acceptable)

9955 Tamiami Trail North

83 Suite 3

84 City

Naples

FL

85 Zip Code

34108

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME FORNASARI, MARTA CECILIA
STREET ADDRESS 3174 TAMiami TRAIL EAST, SUITE 1
CITY-ST-ZIP NAPLES FL 33962

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME D/VP/T
1.3 STREET ADDRESS FORNASARI, MARTA CECILIA
1.4 CITY-ST-ZIP 9955 Tamiami Trail North, Suite 3
Naples, FL 34108

TITLE ☒ DELETE

NAME DENI, CLAUDIA
STREET ADDRESS 3174 TAMiami TRAIL EAST, SUITE 1
CITY-ST-ZIP NAPLES FL 33962

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME RIDDLE, MELINDA P
STREET ADDRESS 3174 TAMiami TRAIL E, SUITE 1
CITY-ST-ZIP NAPLES FL

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME RIDDLE, MELINDA P.
3.3 STREET ADDRESS 9955 Tamiami Trail North, Suite 3
3.4 CITY-ST-ZIP Naples, FL 34108

TITLE ☐ DELETE

NAME JOSEPHINE ALAIMO
STREET ADDRESS 9955 Tamiami Trail North, Suite 3
CITY-ST-ZIP Naples, FL 34108

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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.

CR2E034 (10/97)