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 # P96000058248 (1)

BOTANICA OF BOCA, INC.

Principal Place of Business

Mailing Address

FILED Apr 27 1998 8:00am Secretary of State



7050-40 W PALMETTO PARK RD BOCA RATON FL 33433 US		22150 CONCHA AVENUE BOCA RATON FL 33428		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/09/1996			
2. Principa 21	al Place of Business	2a. Mailing Address 26	r		4. FEI Number Applied		olied For Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.	·		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & 5	State	City & State	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Z ip 24	Country 25	Zip 29	Countr	у	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ALBEDTINE MICHAEL OF CO. 81 Name							
ALBERTINE, MICHAEL O ESQ.				Name			
2200 W. COMMERCIAL BLVD. STE 301 FORT LAUDERDALE FL 33309					ddress (P.O. Box Number is Not Acceptable)		
			83	'			1
			84	City	FL	85 Zip C	ode
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida, Such change was authorized by 					ornaration submits this statement for the surnage s	changing its ointment as r	registered egistered
SIGNATURE							
40	Signature Typed or profed name of registered	age chand when applicable (NOTE NDD DIRECTORS		ent signature red	quired when reinstating) DATÉ		
TITLE	D OFFICIAS)	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS Change	IN 12 Addition
NAME	DRUCKER, (RWIN	E PARTIE	1.1 HILE			L Change	Addition
STREET ADDRES				ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33428		1.4 CITY -:	- 1			
TITLE	Ō	DELETE	2.1 TITLE	21 - 1 "		Change	Addition
NAME	Plominski, robert		2.2 NAME				
STREET ADDRES	ss 22150 CONCHA AVENUE		2 3 STREE	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33428		2 4 CITY-	ST-ZIP	•		
TITLE			3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRES	SS		3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-	S1-ZIP			
TITLE	☐ DELETE		4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME		•		-
STREET ADDRES	is			ADDRESS			
CITY-ST-ZIP TITLE	T neiete		4.4 CITY - S	ST-ZIP		<u> </u>	T 1 1 1 1 1 1 1
NAME			5.1 TITLE	1		Change	☐ Addition
STREET ADDRES			5.2 NAME	ADDOLCC			
CITY-ST-ZIP	~		5 3 STREET				
TITLE	DELETE		5.4 CITY - 5 6.1 TITLE	01-71		Change	Addition
NAME			6.2 NAME			onungo	radiion
STREET ADDRES	s		6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - 9				
4 4 11 4							

Thereby 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 changes for on air attachment with an address. Mulac