

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

FILED
May 21 1998 8:00am
Secretary of State

DOCUMENT # P96000069746 (1)

1. Corporation Name

HIALEAH GARDEN LADY, INC.



Principal Place of Business

Mailing Address

13842 SW 8 ST
MIAMI FL 33184

2750 W 68th
Hialeah FL 33016

13842 SW 8 ST
MIAMI FL 33184

5769 NW 7th
MIAMI FL 33126

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 2750 W 68th

Suite, Apt. #, etc.

22 125-126

City & State

23 Hialeah Fla

Zip

24 33016

County

PINEDA, ALEX
13842 SW 8 ST
MIAMI FL 33184

5769 NW 7th
MIAMI FL 33126

2a. Mailing Address

26 5769 NW 7th

Suite, Apt. #, etc.

27

City & State

28 MIAMI FL

Zip

29 33126

Country

5769 NW 7th
MIAMI FL 33126

3. Date Incorporated or Qualified

08/15/1996

4. FEI Number

65-0692456

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	☐ Change ☐ Addition
DPT	PINEDA, ALEX	1.2 NAME	
STREET ADDRESS	13842 SW 8 ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33184	1.4 CITY-ST-ZIP	
TITLE	DVS	2.1 TITLE	☐ Change ☐ Addition
NAME	PINEDA, MARTHA	2.2 NAME	
STREET ADDRESS	13842 SW 8 ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33184	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 trustee 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 addendum with an address.

SIGNATURE _____ DATE 5-1-98 305-264-2814

CR2E034 (10/97)