## **2004 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

## **DOCUMENT # P96000098553**



## **FILED** Apr 21, 2004 8:00 am Secretary of State

04-21-2004 90098 027 \*\*\*150.00

NEWGEN	PROPERTIES, INC.							
2215 BELVEDERE RD 3			363 COWEE TUNNEL RD		44033324		<b>a:</b> Shu: Shùn h	
2. Principal Place of Business 3.		3. Mailing Address	. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			004 Chg-P	CR2E03	34 (10/03)	
City & State		City & State	City & State		lumber 2274857		خسارسينا	plied Foot
Zip	Country	Zip	Country		ficate of Status Desire	ea 🗀 r	\$8.75 Add Fee Require	
	6. Name and Address of Current F	legistered Agent	Name	7. Name	and Address of No	w Registered A	gent	
AUAIS, JR, JOSE F 8291 NW 167TH TERRACE HIALEAH, FL 33016				ddress (P.O. Box N	AKES	rtable)	Zip Cod	 
the obligat	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent a		registered Office of		or both, in the State o	of Florida. 1 am fa	arniliar with,	and acc
After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	Trust Fund Conti		Added to Fees				
10.	OFFICERS AND I		11.	ADDIT1	ONS/CHANGES TO	OFFICERS AND	DIRECTOR	
TITLE	PD	☐ Delete	TITLE			1	☐ Change	☐ Ad
NAME STREET ADDRESS	AUAIS, JOSE F JR. 8291 NW 167TH TERRACE		NAME STREET ADDRESS					
CITY-ST-ZIP	HIALEAH, FL 33016		CITY-ST-ZIP	MIGNI I	AKES FL	7 301/		
TITLE	D	<b>⊠</b> Delete	TITLE	THE PLANT	TAGJ IL	30016	Change	☐ Ad
NAME	BENNETT, JERRY L	23 00,000	NAME					
STREET ADDRESS	244 PERRY AVENUE		STREET ADDRESS					
CITY-ST-ZIP	LAKE WORTH, FL 33463		CITY-ST-ZIP					
TITLE	DT SARPHER ISABEER	☐ Delete	TITLE				☐ Chànge	Ad
NAME STREET ADDRESS	GARDNER, JENNIFER M 363 COWEE TUNNEL RD		NAME Street Address	1				
CITY-ST-ZIP	SYLVA, NC		CITY-ST-ZIP					
TITLE	DS	□ Delete	TITLE		<del></del>		Change	☐ Ad
NAME	GARDNER, LAWRENCE R		NAME	ļ				_
STREET ADDRESS	363 COWEE TUNNEL RD	ÿ•	STREET ADDRESS					
CITY-ST-ZIP	SYLVA, NC		CITY-ST-ZIP	<u></u>				
TITLE	D CAUTE MANAGE MA	Delete	TITLE				Change	☐ Ad
NAME STREET, ADDRESS	SMITH, WAYNE M		NAME STREET ADDRESS				_	
CITY-ST-ZIP 2 2 2	MARGATE: FL 33068				*			
TITLE		Delete	TITLE	,	· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Ad
NAME	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del></del>	NAME		•		•	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			. CITY-ST-ZIP		<u> </u>			

12. 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 informati indicated on this report or supplemental 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 direct 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 10 or Block changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE**