**PROFIT** CCRPORATION ANNUAL REPORT



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris 🧽

Secreta y of State

Apr 27, 1999 8:00 am Secretary of State 04-27-1999 90038 018 \*\*\*150.00 1999 DIVISION OF CORPORATIONS DOCUMENT # P97000077918 00 randon kun dan Georgana merimper My Garden's Friend Inc. 4 547333 - 90021 - 1 9961 5 W, 40 terr. Miami FLA 33165. DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed Principal Place of Business 40 terr 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certifica e of Status Desired 22 Fee Required City & State -Cily & State \$5.00 May Be 6. Election Campaign Financing Miam. 23 Trust Fund Contribution Added to ees 8. This corporation owes the current year Ir tangible 25 Dade. CINo Personal Property Tax. ☐ Yes 10. Name and Address of New Registered Agent YRAIdO MARRERU 9961 SW 40 TERRA. MIAMI, FI. 33165 Name Street Adcress (P.O. Box Number is Not Acceptable) City 85 Zip Corla 11. Pursuan to the provisions of Sections 607.0502 and 607.1508, Florida Statute's, 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 at d trie if applicable (NOTE: Registered Agent signature regu-(11/98)CFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE President and Director DELETE 1.1 TITLE Change maldo Marrero 19961 3 W 40 tarra NAME 12 NAME CR2E034 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 14 CITY-ST-ZIP Addition Change TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE Cnange Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY-ST-ZIF DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE SITTLE Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 City-St-ZP CITY-ST-ZIP 6.1 TITLE ☐ DELETE Addition Change 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby sertify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3x(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 attackment with an address, with all other like empowered.

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FILED