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

**PROFIT** ~CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000077918

MY GARDEN'S FRIEND INC. Principal Place of Business Mailing Address

## **FILED** Apr 04, 2000 8:00 am Secretary of State

04-04-2000 90081 042 \*\*\*150.00



9961 SW 40TH MIAMI FL 33165		9961 SW 40TH TERR. MIAMI FL 33165				; DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified						
						09/08/1997						
2. Principal Pl	ace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number			Applied For			
21 7		26	26				65-0778809			Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Addition					ditional	
22		27	27			5. Certificate of	of Status Desired		Fe	e Req	uired	
City & State		City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees						
Zip	Country	Zip	Zip Country			8. This corporation owes the current year Intangible Personal Property Tax.						
24	25	29 of Current Registered Agent	[30]				Address of New R			· · <u>-</u>	3.10	
	9. Name and Address	or Current Registered Agent	8	1 !	Name	10: 1441110 4110	,	ogiotei e i				
MAR	RERO, YRALDO	v	8:			rece (P.O. Boy Nu	mher is Not Accents	hle)				
	SW 40TH TERR.					t Address (P.O. Box Number is Not Acceptable)						
MAIM	/il FL 33143		8	3		1						
			8-	4 (	City			FL	85	Zip Co	ode	
agent. I au	m familiar with, and accept	the State of Florida. Such change was a the obligations of, Section 607.0505, Flo positered agent and title if applicable. (NOTE	nda Statute			ad when reinstating)		DATE				
12.	OFFI	CERS AND DIRECTORS	13.			ADDITIONS	CHANGES TO OFF	FICERS AND	DIRE	CTOR	S IN 12	
TITLE	PSD	□ DELETE	1.1 TITLE			1			Ch:	ange	☐ Addition	
NAME	MARRERO, YRALDO		1.2 NAME	•								
STREET ADDRESS	2800 SW 102 AVE.	•	1.3 STRE	ETAD	DORESS							
CITY-ST-ZIP	MIAMI FL 33165		1.4 CITY-	ST-ZI	ZIP	1						
TITLE		☐ DELETE	2.1 TITLE						Ch	ange	Addition	
NAME			2.2 NAME									
STREET ADDRESS			2.3 STRE	ET AD	DDRESS	1						
CITY-ST-ZIP			2. 4 GTY	2. 4 CfTY-\$T-ZIP								
TITLE		☐ DELETE	3.1 TITLE			-		•	Ch	ange	Addition	
NAME			3.2 NAME	•		1						
STREET ADDRESS			3.3 STRE	ETAD	DORESS							
CITY-ST-ZIP		•	3.4. CITY	-ST-Z	ZIP							
TITLE				4.1 TITLE					Ch	ange	Addition	
NAME			4. 2 NAM	Е		1						
STREET ADDRESS			4.3 STRE	ET AC	DDRESS						,	
CITY-ST-ZIP			4.4 CITY-									
TITLE		☐ DELETE	5.1 TITLE			1			☐ Ch	ange	Addition	
NAME			5.2 NAME			)						
STREET ADDRESS			5.3 STRE	ETAL	DDRE\$\$							
CITY-ST-ZIP			5.4 CITY-	·ST-Z	ZIP	;						
TITLE		☐ DELETE	6.1 TITLE	:		1			☐ Ch	ange	☐ Addition	
NAME			6.2 NAME	E		,					-	
STREET ADDRESS			6.3 STRE	ETAC	DDRESS							
CITY-ST-ZIP			6.4 CITY-	-\$T-Z	ZIP							
OHIT STAN			-									

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, with all other like empowered.

SIGNATURE: