

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000020573

GARDEN INDUSTRIES, INC.

FILED
May 16, 2000 8:00 am
Secretary of State
05-16-2000 90145 025 ***150.00

1. Principal Place of Business
2812 NW 35 ST
Suite, Apt. #, etc
Miami FL
City & State
Zip 33142 Country

3. Mailing Address
2812 NW 35 ST
Suite, Apt. #, etc
Miami FL
City & State
Zip 33142 Country

A3057500

4. FFL Number 65-0907198
Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LYA PALINSKY
2812 NW 35 ST
Miami FL 33142

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida
SIGNATURE *[Signature]* DATE 4/24/00
(NOTE: Registered Agent Signature required when re-registering)

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back) ☐
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
NAME	☐ Delete	TITLE	☐ Change	☐ Addition	
STREET ADDRESS		NAME			
CITY - ST - ZIP		STREET ADDRESS			
P ELI BANOUN 2601 S. BAYSHIRE DR. Miami FL 33133					
SHIMON WOLKOWICKI 2812 NW 35 ST Miami FL 33142					
SD LYA PALINSKY 2812 NW 35 ST Miami FL 33142					

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information 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 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.
SIGNATURE: *[Signature]* DATE 4-24-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR