Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90023 037 \*\*\*150.00

## 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 # J06061**

FLORAL	PROMOTIONS, INC.				
Principal Place	of Business	Mailing Address			.B.S. B.1814 B.S.B.S. B.1814 B.1839 1889
405 S STATE RD 7 405 S STATE RD 7 PLANTATION FL 33317 PLANTATION FL 33317					
Common 1	2 00017			DO NOT WRITE IN THIS	SPACE
			·	3. Date Incorporated or Qualifed 03/24/1986	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0094657	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		City & Chata		- Final Control Control	
City & State	e	City & State		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Into	
24	25	29 30	¬ '	Personal Property Tax.	☐Yes ☐No
124)	9. Name and Address of Curren	<u> </u>	<u> </u>	10. Name and Address of New Registered	Agent
KERBEL, PAUL 405 SOUTH STATE ROAD 7 PLANTATION FL 33314			81 Name 82 Street A	ddress (P.O. Box Number is Not Acceptable)	
			84 City	FL	85 Zip Code
office or n agent. I a	egistered agent, or both, in the State of familiar with, and accept the obligated Signature, typed or printed name of registered agent.		norized by the corpor a Statutes.	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appoint the a	ntment as registered
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PD	☐ DELETE		PU	☐ Change ☐ Addition
NAME	KERBEL, GAIL N		1.2 NAME	LERBEL, GAILN	
STREET ADDRESS	4210 SW 9TH ST		1.3 STREET ADDRESS	7401 SW 1057	
CITY-ST-ZIP	PLANTATION FL		1.4 CITY-ST-ZIP	PLANTATIN FL 333 17	
TITLE	VSC	☐ DELETE		Dea Kerau, Paul	☐ Change ☐ Addition
NAME	Kerbel, Paul		2.2 NAME		
STREET ADDRESS	4210 SW 9TH ST		2.3 STREET ADDRESS	2401 SW/05T.	27217
CITY-ST-ZIP	PLANTATION FL		2.4 CITY-ST-ZIP	Canta Trail	5 32 · /
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	•	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.1 TITLE		
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	5.1 TITLE		Ligonange Li Addition
NAME			52 NAME	•	

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 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 an appear of the corporation of the corporatio

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Addition

Change