

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000050255

FILED
Feb 27, 2003
Secretary of State

Entity Name: LOLA FLOWERS, INC.

Current Principal Place of Business:

9400 SOUTH DADELAND BLVD.
SUITE 601
MIAMI, FL 33156

New Principal Place of Business:

9415 SUNSET DRIVE
SUITE 218
MIAMI, FL 33173

Current Mailing Address:

9400 SOUTH DADELAND BLVD.
SUITE 601
MIAMI, FL 33156

New Mailing Address:

P.O. BOX 630456
MIAMI, FL 33163

FEI Number: 65-1105271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRATS, GABRIEL
2121 PONCE DE LEON BLVD, STE 240
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINEZ, GRISELDA
Address: 7000 ISLAND BLVD #1602
City-St-Zip: AVENTURA, FL 33160

Title: TS () Delete
Name: BRAVO, PEDRO
Address: 9400 S.DADELAND BLVD #601
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: CASTRO, JORGE
Address: 7000 ISLAND BLVD.#311
City-St-Zip: AVENTURA, FL 33160

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TS (X) Change () Addition
Name: PRATS, GABRIEL
Address: 2121 PONCE DE LEON BLVD. SUITE 240
City-St-Zip: CORAL GABLES, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: CASTRO, JORGE
Address: 2121 PONCE DE LEON BLVD. SUITE 240
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JORGE CASTRO

D

02/27/2003

Electronic Signature of Signing Officer or Director

_____ Date