## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000067503

FILED Apr 27, 2005 Secretary of State

Entity Name: JACKSON MEMORIAL FLOWERS & GIFTS CORP.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
PARK PLA	- AZA EAST 901	NW 17TH STREET	•	
S MIAMI, FL	. 33136			
Current N	Mailing Addres	ss:	New Mailing Address	s:
PARK PLA	AZA EAST 901	NW 17TH STREET		
S MIAMI, FL	. 33136			
FEI Number	r: 35-2230107	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
GARCIA, I				
12320 SW MIAMI, FL				
MIAMI, FL	. 33186 US	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
MIAMI, FL The above n the Stat	e named entity te of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
MIAMI, FL The above n the Stat	e named entity e of Florida.	submits this statement for the labels and the labels are statement for the		d office or registered agent, or both,  Date
MIAMI, FL The above n the Stat SIGNATU	e named entity te of Florida. RE:Electron			
MIAMI, FL The above n the Stat SIGNATU	e named entity te of Florida. RE:Electron	nic Signature of Registered Ag g Trust Fund Contribution ( ).	ent	
MIAMI, FL The above n the Stat SIGNATU	e named entity to of Florida.  RE: Electronompaign Financin	nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS: ) Delete	ent  ADDITIONS/CHANGE	Date

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: EFRAIN GARCIA P 04/27/2005