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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000095559 (7)

JANIE'S FLOWERS, INC.

rincipal Place of Business	Mailing Address
2730 W. COLUMBUS DRIVE Tampa Fl 33807	2730 W. COLUMBUS DRIVE TAMPA FL 33607-2214
Principal Place of Business	2a. Mailing Address

FILED Apr 28 1997 8:00am Secretary of State



								12/18/1995	05/0	1/1996	eport		
. Principal F	Place of Busin	ness	2a. N	lailing Addr	ress			4. FEI Number		Ar	plied For		
1			26					NOT APPLICABLE	····		t Applicable		
Suite, Apt	#, etc.		27 S	uite, Apt. #,	, etc.			6. Certificate of Status Desired		\$8.75 / Fee Re	Additional quired		
Crty & Stal	le		28	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added			
Zip		Country	t	'ip		Country		8. This corporation has liability for			199.032,		
<u> </u>	o Neme	and Address of Cu	29	red Agent		10		Florida Statutes 10. Name and Address of New Re		No			
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BACCARELLA, DOMINIC J													
4144 N. ARMENIA AVE. TAMPA FL 33607					82	82 Street Address (P.O. Box Number is Not Acceptable)							
						83							
						84	City		FL	85 Zip	Code		
I. Pursuant	to the provis	ions of Sections 607	.0502 and 607	.1508, Ftori	da Statutes	the above	-named corp	poration submits this statement for the	purpose of	changing it	s registered		
office or	registered ag	ent or both, in the S	State of Florida	Such chan	nge was au	thorized by	the corporat	poration submits this statement for the little tion's board of directors. I hereby acce	pt the appo	intment as	registered		
	зиттаният w	iin, and accept the t	obligations ut, a	section 607.	.uouo, rion	DA SIBIULES	•						
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The interest certain that me information supplied whit this imag does not admit the same legal effect as if made under oath; that the information indicated on this annual report of supplemental annual proport 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 two 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 charged, or put in attachment with an address. OUNILL

SIGNATURE:

Daytime Phone #

0357243