FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S04823 (8)

1. Corporation Name

~~FLOWERS BY GEORGIA, INC.~~

Georgianna or Joseph Law, Inc.

Principal Place of Business	Mailing Address
12788 INDIAN ROCKS RD. UNIT 6 LARGO FL 34644 US	~~12788 INDIAN ROCKS RD~~ 13000 Gulf Blvd ~~UNIT 6~~ Apt 313 ~~LARGO FL 34644~~ Madeira Beach US Fl. 33708

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 09/26/1990	3a. Date of Last Report: 02/17/1994
4. FEI Number: 59-3024733	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of [redacted] Registered Agent
Law, SMITH, GEORGIA 12788 INDIAN ROCKS RD. UNIT 6 LARGO FL 34644 Name is - Now - Georgia Smith Law	81 Name: Georgianna Smith Law 82 Street Address (P.O. Box Number is Not Acceptable): 13000 Gulf Blvd. 83 Apt. 313 84 City: Madeira Beach FL 85 Zip Code: 33708

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Georgianna Law — 3/1/95

Signature of Registered Agent or Accepted and Signed on Behalf of Registered Agent

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE	PD	☐ Change ☐ Addition
NAME	SMITH, GEORGIA	
STREET ADDRESS	~~3010 S. PINES DR., #L106~~ 13000 Gulf Blvd	
CITY-ST-ZIP	~~LARGO FL~~ # 313 Madeira Beach	
TITLE	VST	☐ Change ☐ Addition
NAME	SMITH, GEORGIA	700001547997
STREET ADDRESS	~~3010 S. PINES DR., #L106~~ 13000 Gulf Blvd	-07/27/95--01076--014
CITY-ST-ZIP	~~LARGO FL~~ # 313 Madeira Beach	****225.00 ****225.00
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

RECEIVED ... 8/3

14. I do 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 report or supplemental 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 on an attachment with an address.

SIGNATURE: Georgia Smith Law — 3/9/95 — 813-397-2409

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

0363276 CP

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 JUL 25 AM 10: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E00001545396
-07/25/95--01068--001
****225.00 ****225.00
DO NOT WRITE IN THIS SPACE

DOCUMENT # S06596 (8)

1. Corporation Name
J.N. FABRICS, NC.

Principal Place of Business
120 NORTHWEST 25TH STREET
MIAMI FL 33127

Mailing Address
120 NORTHWEST 25TH STREET
MIAMI FL 33127

3. Date Incorporated or Qualified: 10/15/1990
3a. Date of Last Report: 08/11/1994

2. Principal Place of Business
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

4. FEI Number: 65-0230043 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ADER; ROBERT
25 WEST FLAGLER STREET
SUITE 1010
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name: Robert Levine, Esq.
82 Street Address (P.O. Box Number is Not Acceptable): 1110 Brickell Avenue
83 7th Floor
84 City: Miami FL
85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] 7/18/95
(New Registered Agent signature) DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	NEVITT, JEFFREY A.
STREET ADDRESS	120 NORTHWEST 25TH ST.
CITY-ST-ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 on an attachment with an address.

SIGNATURE: X [signature] Pres Jeffrey A. Nevitt June 29, 1995 (305) 576-7666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / Date / Daytime Phone #

CR2E034 (3/95)

0036660 CP