

2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 30, 2006
Secretary of State**

DOCUMENT# V46103

Entity Name: FLORA EXPRESS, INC.

Current Principal Place of Business:

3111 COMANCHE RD
ST. CLOUD, FL 34772 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 702076
ST. CLOUD, FL 34770 US

New Mailing Address:

FEI Number: 59-3130092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, STEVEN B
3111 COMANCHE ROAD
SAINT CLOUD, FL 34772 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: D () Delete
Name: EDWARDS, STEVEN B.
Address: 5831 GUENEVERE CT
City-St-Zip: SAINT CLOUD, FL 34772

Title: D () Delete
Name: BARBER, DOUGLAS E
Address: 1507 EAGLES LANDING COURT
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BARBER, DOUGLAS E
Address: 3025 COMANCHE ROAD
City-St-Zip: SAINT CLOUD, FL 34772

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEVEN B. EDWARDS

D

03/30/2006

Electronic Signature of Signing Officer or Director

_____ Date