2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 278841

FILED May 13, 2008 Secretary of State

Entity Name: MINSHALL THE FLORIST INC **Current Principal Place of Business: New Principal Place of Business:** 2920 CENTRAL AVENUE ST PETERSBURG, FL 33712 **Current Mailing Address: New Mailing Address:** 2920 CENTRAL AVENUE ST PETERSBURG, FL 33712 FEI Number: 59-1034024 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LUCCIOLA, MARION M 2920 CENTRAL AVENUE ST PETERSBURG, FL 33712 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition LUCCIOLA, MARION M, LUCCIOLA, MARION M, Name: Name: 4091 31 AVENUE NORTH 4091 31 AVENUE NORTH Address: Address: City-St-Zip: ST PETERSBURG, FL City-St-Zip: ST PETERSBURG, FL 33713 US Title: (X) Change () Addition Title: () Delete LUCCIOLA, ALEXANDER, LUCCIOLA, ALEXANDER, Name: Name: 4091-31 AVENUE, NORTH 4091-31 AVENUE, NORTH Address: Address: ST PETERSBURG, FL ST PETERSBURG, FL 33713 US City-St-Zip:

Title: () Delete LUCCIOLA, MARION M, Name: 4091 31 AVENUE NORTH Address: City-St-Zip: ST. PETERSBURG, FL

Title: () Delete LUCCIOLA, ALEXANDER, Name: Address: 4091 31ST AVE. NO. City-St-Zip: ST. PETERSBURG, FL

City-St-Zip: Title: (X) Change () Addition LUCCIOLA, MARION M, Name: 4091 31 AVENUE NORTH Address: City-St-Zip: ST. PETERSBURG, FL 33713 US Title: (X) Change () Addition LUCCIOLA, ALEXANDER, Name:

Address: 4091 31ST AVE. NO. City-St-Zip: ST. PETERSBURG, FL 33713 US

I hereby certify that the information supplied with this filing does not qualify 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: AMY LUCCIOLA LOVING MGR 05/13/2008