

**FOR PROFIT CORPORATION
ANNUAL REPORT**

08-29-2006 90004 002 ***125.00

FILED

2006 OCT 20 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 288512

1. Entity Name
FLOWERS ROYALE, INC.



Principal Place of Business

7455 N.W. 8 ST.
MIAMI, FL 33126

Mailing Address

7455 N.W. 8 ST.
MIAMI, FL 33126

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062005 Chg-P CR2E034 (10/03)

4. FEI Number
59-1098653

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FERRO, JULIO
6988 SUNRISE DRIVE
CORAL GABLES, FL 33133**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME FERRO, JULIO
STREET ADDRESS 6988 SUNRISE DRIVE
CITY-ST-ZIP CORAL GABLES, FL 33143

TITLE ☐ Change ☐ Addition
NAME **Blade**
STREET ADDRESS
CITY-ST-ZIP **800081399508
10/31/06--01079--006 **25.00**

TITLE STD ☐ Delete
NAME PADIAL, NORA
STREET ADDRESS 10220 S.W. 91ST STREET
CITY-ST-ZIP MIAMI, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME FERRO, JULIO N
STREET ADDRESS 1646 SW 92 AVE
CITY-ST-ZIP MIAMI, FL 33176

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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 10 or Block 11 if changed, or on an attachment with an address, with any other like empowered.

SIGNATURE:

Nora Padial

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/24/06

Date

305 262 1577

Daytime Phone #

ATTACHMENT

Flowers Royale, Inc.

7455 N.W. 8th STREET • MIAMI, FLORIDA 33126

PHONE: (305) 282-1577

1-800-327-7477

AUGUST 24, 2006

FLORIDA DEPT. OF STATE
DIVISION OF CORPORATIONS
P O BOX 6327
TALLAHASSEE, FLORIDA 32314

RE: 2006 ANNUAL REPORT

GENTLEMEN:

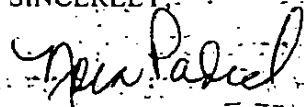
I AM ENCLOSING AN ANNUAL REPORT FOR 2006. I CALLED YOUR OFFICE YESTERDAY BECAUSE I HAD NOT RECEIVED THE FORM TO FILE THE REPORT FOR 2006.

I SPOKE WITH GARY AND HE SAID IT WOULD BE OK TO USE AN OLD FORM AND FIX THE YEAR AND CORRECT ANY INFORMATION. HE ALSO SAID THAT I SHOULD INCLUDE LETTER EXPLAINING THE REASON FOR THE REPORT NOT BEING FILED.

ENCLOSED PLEASE FIND AN ANNUAL REPORT FORM AND A CHECK FOR \$125.00. IF I NEED TO SEND ANYTHING ELSE OR AN ADDITIONAL AMOUNT PLEASE LET ME KNOW.

THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

SINCERELY,



NORA PADIAL
SECRETARY-TREASURER