# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 19, 2005**
**Secretary of State**

DOCUMENT# 373222

**Entity Name:** FLO-LOU, INC.

**Current Principal Place of Business:**

14549 GLENCAIRN RD
14549 GLENCAIRN RD
MIAMI LAKES, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

14549 GLENCAIRN RD
14549 GLENCAIRN RD
MIAMI LAKES, FL 33016 US

**New Mailing Address:**

**FEI Number: 59-1431257** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GARCIA,LOUIS
14549 GLENCAIRN RD
MIAMI LAKES, FL 33016 US

**Name and Address of New Registered Agent:**

RICCOBONO, LINDA
14549 GLENCAIRN RD
MIAMI LAKES, FL 33016 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: LINDA RICCOBONO 04/19/2005
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P (X) Delete
Name: GARCIA,LOUIS J,
Address: 4151 PALM AVENUE
City-St-Zip: HIALEAH, FL

Title: VP ( ) Delete
Name: RICCOBONO,LINDA,
Address: 4151 PALM AVENUE
City-St-Zip: HIALEAH, FL

Title: ST ( ) Delete
Name: GARCIA,FLORENCE E,
Address: 4151 PALM AVENUE
City-St-Zip: HIALEAH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition
Name: RICCOBONO, LINDA R
Address: 4151 PALM AVENUE
City-St-Zip: HIALEAH, FL 33012

Title: PT (X) Change ( ) Addition
Name: GARCIA, FLORENCE E
Address: 4151 PALM AVENUE
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FLORENCE E GARCIA ST 04/19/2005
Electronic Signature of Signing Officer or Director Date