


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 485884</b>	
1. Entity Name <b>GARDEN OF LOVE, INC.</b>	

Principal Place of Business <b>257 COMMERCIAL BLVD LAUDERDALE BY THE SEA, FL 33308 US</b>	Mailing Address <b>257 COMMERCIAL BLVD LAUDERDALE BY THE SEA, FL 33308 US</b>
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**DO NOT WRITE IN THIS SPACE**



02032005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-1617077</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>HAMILTON, DOLORES 257 COMMERCIAL BLVD LAUDERDALE-BY-THE-SEA, FL 33308</b>
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**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOLORES HAMILTON 611 NE 46TH COURT OAKLAND PARK, FL 33334
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MUSY, DAN 611 N.E. 46TH CT. OAKLAND PARK, FL 33334
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**DO NOT WRITE IN THIS SPACE**

100000357287  
05/04/05-80066-009 150.00

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 all other like empowered.

**SIGNATURE:** *Dolores Hamilton* **4/27/05** **954 491 8380**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #