

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 JUL -3 AM 8:20

**DOCUMENT # 686714 (7)**

1. Corporation Name  
**CORAL CASTLE, INC.**

Principal Place of Business  
**28635 SOUTH FEDERAL HIGHWAY  
HOMESTEAD FL 33033-1214**

Mailing Address  
**28635 SOUTH FEDERAL HIGHWAY  
HOMESTEAD FL 33033-1214**

DO NOT WRITE IN THIS SPACE

9. Date Incorporated or Qualified <b>09/05/1980</b>	3a. Date of Last Report <b>02/18/1994</b>
4. FEI Number <b>59-2060000</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status (Issued) <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. This corporation has liability for filing fees in excess of \$100,000 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
State, Apt. #, etc. <b>22</b>	State, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
24	25
29	30

9. Name and Address of Current Registered Agent

**PARRISH, BRUCE W., JR.  
105 S NARCISSUS AVE  
CITIZENS BLDG, SUITE 701  
W PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

**81 Name**  
**82 Street Address (P.O. Box Number is Not Accepted)**  
**83**  
**84 City** **FL 85** **Zip Code**

11. Pursuant to the provisions of Sections 607.0600 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office as registered agent in both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I hereby certify that I am not the registered agent of any other corporation of Section 607.0600, Florida Statutes.

STATE OF FLORIDA

12. OFFICERS AND DIRECTORS		13. ALL FLOWERS OWNERS (SEE FEES AND FORMS FOR DETAILS)	
12a	<b>P BARR, IRVING 180 EAST PEARSON CHICAGO IL</b>	13a	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12b	<b>ST BARR, LYNN 180 EAST PEARSON CHICAGO IL</b>	13b	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12c		13c	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12d		13d	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12e		13e	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12f		13f	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12g		13g	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12h		13h	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12i		13i	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12j		13j	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information furnished in this report is true and correct and that my corporation shall keep the same legible for as long as the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my report complies with this law as voluntarily furnished and does not qualify for the exemption stated in Section 607.0705, Florida Statutes. I have certified that the information submitted in this annual report or supplemental general report is true and accurate and that my corporation shall keep the same legible for as long as the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my report complies with this law as voluntarily furnished and does not qualify for the exemption stated in Section 607.0705, Florida Statutes, and that my report complies with this law as voluntarily furnished and does not qualify for the exemption stated in Section 607.0705, Florida Statutes.

**SIGNATURE:** *[Signature]* **6-20-95 247-6345**  
SIGNATURE OF REGISTERED NAME OF BOARD OFFICER OR DIRECTOR