

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007453

Entity Name: MISTY FLOWERS, INC.

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

4820 PROVINCE LINE ROAD  
PRINCETON, NJ 08540

## New Principal Place of Business:

## Current Mailing Address:

4820 PROVINCE LINE ROAD  
PRINCETON, NJ 08540

## New Mailing Address:

FEI Number: 51-0394007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COEL, MARK A ESQ.  
1900 GLADES ROAD  
SUITE 350  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CVP ( ) Delete  
Name: MCLAUGHLIN, GEORGE H  
Address: 4820 PROVINCE LINE ROAD  
City-St-Zip: PRINCETON, NJ 08540

Title: PD ( ) Delete  
Name: CAPLAN, ALAN  
Address: 4820 PROVINCE LINE ROAD  
City-St-Zip: PRINCETON, NJ 08540

Title: STD ( ) Delete  
Name: MCLAUGHLIN, GEORGE H II  
Address: 4820 PROVINCE LINE ROAD  
City-St-Zip: PRINCETON, NJ 08540

Title: PD ( ) Delete  
Name: CAPLAN, ALAN  
Address: 8 BERKSHIRE COURT  
City-St-Zip: MANALOPON, NJ 07726

Title: CD ( ) Delete  
Name: MCLAUGHLIN III, GEORGE H  
Address: JUAN DE VELASCO  
City-St-Zip: QUITO, ECUADOR,

Title: ST ( ) Delete  
Name: MCLAUGHLIN, GEORGE H  
Address: 4820 PROVINCE LINE RD  
City-St-Zip: PRINCETON, NJ 08540

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: GEORGE MCLAUGHLIN 11

STD

01/14/2009

Electronic Signature of Signing Officer or Director

Date