

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 27 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F66148 (0)  
1. Corporation Name  
FLOWERS BY BRENDA, INC.



Principal Place of Business  
13265 NW 7TH AVE  
PO BOX 510028  
MIAMI FL 33168  
US

Mailing Address  
13265 NW 7TH AVE  
PO BOX 510028  
MIAMI FL 33168  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 13265 NW 7th Avenue  
Suite, Apt. #, etc.  
22 City & State  
23 Miami, Florida  
Zip  
24 33168  
Country  
25 USA

2a. Mailing Address  
26 PO Box 381401  
Suite, Apt. #, etc.  
27 City & State  
28 Miami, Florida  
Zip  
29 33238  
Country  
30 USA

3. Date Incorporated or Qualified  
02/05/1982

4. FEI Number  
59-2319632  
Applied For  
Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GRIFFIN, MARY  
13265 NW 7TH AVE  
MIAMI FL 33150

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Mary Griffin*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE  
1/2/98

12. OFFICERS AND DIRECTORS

TITLE	JACKSON, BRENDA W.	<input checked="" type="checkbox"/> DELETE
NAME	13265 NW 7TH AVE	
STREET ADDRESS	MIAMI FL	
CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> DELETE
NAME	GRIFFIN, JUDY N	
STREET ADDRESS	13265 NW 7TH AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	GRIFFIN, MARY	
STREET ADDRESS	13265 NW 7TH AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	CMTR	<input type="checkbox"/> DELETE
NAME	GRIFFIN, JANICE I	
STREET ADDRESS	13265 NW 7TH AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	C/M/TR/T
4.3 STREET ADDRESS	GRIFFIN, JANICE I.
4.4 CITY-ST-ZIP	13265 NW 7th Avenue, Miami, FL
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Janice Griffin* JANICE GRIFFIN 1/2/98 (305) 687-5780

CR2E034 (10/97)