2008 FOR PROFIT CORPORATION REINSTATEMENT

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DOCUMENT # K65235				A STATE	FILED
THE FLOWER CENTER, INC.					08 NOV -6 PH 3: 02
Principal Plac	a of Business		Mailing Address	(Single)	TALLAHASSEE, FLORIDA
Principal Place of Business 28700 SW 157TH AVE			28700 SW 157TH AVE		TALLAHASSEE, FLORIDA
HOMESTEAD	, FL 33033		HOMESTEAD, FL 3303	33	
2 Principal P	lace of Business - No	P.O. Box #	3. Mailing Address		
·					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		110 ATOS : REINATENENE 198 (1/00)	
City & State		City & State		4. FEI Number Applied For 65-0101779 Not Applicable	
Zip	Count	ry	Zip	Country	5. Certificate of Status Desired \$8.75 Additional
6. Name and Address of Curren			t Registered Agent		Fee Required 7. Name and Address of New Registered Agent
MALDONADO, EDUARDO				Name	
28700 SW 157 AVE				Street Addres	s (P.O. Box Number is Not Acceptable)
HOMESTEAD, FL 33033					
				City	FL Zip Code
8. The above the obligat	named entity submits ions of registered age	this statement (int.	or the purpose of changing its	registered office or regis	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE					
	Signature, typed or printed na	ame of registered ager	ot and title if applicable (NOT)	E: Registered Agent signature rec	uired when reinstating) DATE
	E NOW!!! FEE IS : nuary 1, 2009, Fee		00	-	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	I	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME	PTSD MALDONADO, EI	DUARDO	Detete	TIFLE NAME	☐ Change ☐ Addition
STREET ADDRESS					
CITY ST-7IP	28700 S.W. 157 A			STREET ADDRESS	
CITY ST-ZIP	HOMESTEAD, FL		☐ Delete	STREET ADDRESS CHTY-ST-ZIP	000137698 6444 @ Addition
TITLE NAME			☐ Delete	CHTY-ST-ZIP THEE NAME	000137698644 0 Addition 11/06/08-01019013 **150.00
TITLE			☐ Delete	CHY-ST-ZIP TITLE	0001375986660 □ Addition 11/06/0801019013 **150.00
TITLE NAME STREET ADDRESS			☐ Delete	CHY-SI-ZIP TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE	11/06/0801019013 **150.00
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