2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# K68413

Entity Name: FLOGART, INC.

Current Principal Place of Business:

19101 MYSTIC POINTE DR
#2708
NORTH MIAMI, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

C/O FEDDER & GARTEN
36 SOUTH CHARLES ST SUITE 2300
BALTIMORE, MD 21201 US

New Mailing Address:

FEI Number: 52-1626500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOSS, LYNNORE
19101 MYSTIC POINTE DRIVE
#2708
NORTH MIAMI, FL 33180 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GARTEN, HERBERT S.
Address: 19101 MYSTIC POINTE DRIVE #2708
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: STD ( ) Delete
Name: MOSS, LYNNORE G.
Address: 19101 MYSTIC POINTE DR #2708
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: VD ( ) Delete
Name: GARTEN, MORRIS
Address: 13002 TALISMANROAD
City-St-Zip: REISTERSTOWN, MD 21136

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GARTEN, MORRIS L
Address: 36 S CHARLES ST, STE 2300
City-St-Zip: BALTIMORE, MD 21201

Title: VP (X) Change ( ) Addition
Name: GARTEN, ALAN F.M.
Address: 36 S CHARLES ST, STE. 2300
City-St-Zip: BALTIMORE, MD 21201

Title: T (X) Change ( ) Addition
Name: GARTEN, MORRIS L
Address: 36 S CHARLES ST, STE. 2300
City-St-Zip: BALTIMORE, MD 21201

Title: S ( ) Change (X) Addition
Name: GARTEN, LEETE A
Address: 1604 BARTHEL ROAD
City-St-Zip: LUTHERVILLE, MD 21093

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: MORRIS L. GARTEN P 04/30/2009

Electronic Signature of Signing Officer or Director Date