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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K95404

(5)

CKIDDAIG CHINCHIN

NE	FLORIST.	INC.	

## **FILED** Mar 18 1997 8:00am Secretary of State

Suite Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional	Principal Place of Business  1562 S DIXIE HWY  CORAL GABLES FL 33146	Mailing Address 1562 S DIXIE HWY CORAL GABLES FL 3314					
So ice, April 8, cir.    So ice, April 8, cir.   So ice April 8, cir							
Subject of the provincing of Suctions CO7 00027 and CO7 1508, Florida Statules. The above-named comporation submits this statement for the purpose of changing the degleter of officers. Thereby scuept the appointment as registered after a subject to the appointment as registered officers. Thereby scuept the appointment as registered officers. Thereby scuept the appointme	Principal Place of Business 21	<b>├</b> ──				<b>}</b>	
City 6 State    City 6 State   28   City 10   28   City 10   29   30   City 11   25   25   25   25   25   25   25		· ·			5. Certificate of Status Desired		
Zyl   Country   Zyl   20   30   10   10   10   10   10   10   1	City & State	City & State	City & State				
GEYER, HAYDEE S. 133 SEVILLA CORAL GABLES FL 33134  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code Office or registered agent appearance of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent at a final accept the obligations of .5ection 97.560F, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent at a final accept the obligations of .5ection 97.560F, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent are final accept the obligations of .5ection 97.560F, Florida Statutes  SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OI FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12 AMAR 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12 AMAR 150 SIREL ADDRESS  COPY 51.0F  STREET ADDRESS  COPY 51.0F  STREET ADDRESS  COPY 51.0F  COPY	Zip Country	Zip	) <del></del>		8. This corporation has liability for intangible tax under s. 199.032,		
GEYER, HAYDEE S. 1331 SEVILLA CORAL GABLES FL 33134  82 Street Address (P.O. Box Number is Not Acceptable)  83 Seven Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 Street Address (P.O. Box Number is Not Acceptable)  86 City FL 85 Zip Code  87 Street Address (P.O. Box Number is Not Acceptable)  88 City Code  89 City FL 85 Zip Code  80 City FL 85 Zip Code  81 Address (P.O. Box Number is Not Acceptable)  88 Zip Code  89 City FL 85 Zip Code  80 City FL 85 Zip Code  80 City FL 85 Zip Code  80 City FL 85 Zip Code  81 Address (P.O. Box Number is Not Acceptable)  80 City FL 85 Zip Code  81 Address (P.O. Box Number is Not Acceptable)  80 City FL 85 Zip Code  81 Address (P.O. Box Number is Not Acceptable)  81 Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  87 Address (P.O. Box Number is Not Acceptable)  86 Zip Code  87 Address (P.O. Box Number is Not Acceptable)  87 Address (P.O. Box Number is Not Acceptable)  88 Zip Code  89 City FL 85 Zip Code  89 City FL 85 Zip Code  80 Zip Code  81 Address (P.O. Box Number is Not Acceptable)  81 Address (P.O. Box Number is Not Acceptable)  82 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  87 Address (P.O. Box Number is Not Acceptable)  87 Address (P.O. Box Number is Not Acceptable)  88 Zip Code  89 Zip Code  80 Zip Code			130	····			<del></del>
1331 SEVILA CORAL GABLES FL 33134  182   Street Address (P. D. Box Number is Not Acceptable)  183   Sevin			8	Name			
B3   B4   City	1331 SEVILLA		6:	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
11. Pursuant to the provisions of Secheris 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 to mit children with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OF FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. DELETE 1.1 TITLE	CUHAL GABLES FL 33134		8:	3			***************************************
11. Pt. Stand to the provisions of Sections 697 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agond. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OF Inceres AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. OF Inceres AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. STREET ADDRESS  16. STREE			8-	4 City		F1 85 Zi	p Code
THE   PD	SIGNATURÉ Signation i type a corporational e of noostero	d agent and title if applicable (No	OTE: Registered A		ired when reinstating)	DATE	
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CTY-S1-ZIP	NAME		3 2 NAME				
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THILE         DELETE         61 TITLE         Change         Addition           NAME         62 NAME           STREET ADDRESS         63 STREET ADDRESS           CITY-ST-ZIP         64 CITY-ST-ZIP	STREET ADDRESS		5.3 STRE	ET ADDRESS			
NAME STREET ALORESS 62 NAME 63 STREET ADDRESS CITY ST-7/P 64 CITY - ST-7/P	Į		5.4 CITY	-ST-ZIP			
STREET ADDRESS  CITY-ST-ZIP  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP		DELETE				Chang	e Addition
CITY-ST-ZIP	NAME		62 NAM	E }			
	STREET APORESS		6.3 STAE	et address			

information indicated on this annual report or supplemental annual report Lam an officer or director of the corporation or the receiver or trustee en appears in Block 12 or Block 13 if changed, or on an aria the entire than wue and accurate and that my signature shall have the same legal effect as if made under oath; were to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

March 13, 1997

(305)669-9960

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