

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000031080

FILED
Apr 19, 2012
Secretary of State

Entity Name: TROPICAL FLAIR FLORIST LLC

Current Principal Place of Business:

2750 SW 154 AVE
DAVIE, FL 33331

New Principal Place of Business:

Current Mailing Address:

2750 SW 154 AVE
DAVIE, FL 33331

New Mailing Address:

FEI Number: 27-5550709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, JOAN
2750 SW 154 AVE
DAVIE, FL 33331 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MURPHY, JOAN
Address: 2750 SW 154 AVE
City-St-Zip: DAVIE, FL 33331

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOAN MURPHY

MGR

04/19/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date