

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M18100

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: PREMIUM FLOWERS CORPORATION

## Current Principal Place of Business:

1301 NW 84TH AVE  
115  
DORAL, FL 33126 US

## New Principal Place of Business:

1301 NW 84TH AVENUE  
SUITE 115  
DORAL, FL 33126 US

## Current Mailing Address:

C/O IVAN A. GOMEZ  
601 BRICKELL KEY DR. STE 507  
MIAMI, FL 33131 US

## New Mailing Address:

C/O IVAN A. GOMEZ, P.A.  
601 BRICKELL KEY DRIVE SUITE 507  
MIAMI, FL 33131 US

FEI Number: 59-2556768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

IAG CORPORATE SERVICES, INC.  
601 BRICKELL KEY DR., STE 507  
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: PAREDES, ENRIQUE  
Address: 79 SHORE DR. W.  
City-St-Zip: MIAMI, FL 33133

Title: VP ( ) Delete  
Name: PAREDES, FERNANDO  
Address: 1301 NW 84 AVENUE #115  
City-St-Zip: MIAMI, FL 33126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: PAREDES, ENRIQUE  
Address: 3004 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33129 US

Title: VP (X) Change ( ) Addition  
Name: PAREDES, FERNANDO  
Address: 1301 NW 84 AVENUE, SUITE 115  
City-St-Zip: MIAMI, FL 33126 US

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: ENRIQUE PAREDES

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date