

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.  
AMOUNT DUE ON OR BEFORE 8/9/96: \$228 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
Santra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED AND FILED**

95 JUL -6 AM 8:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # M32526 (9)**

1. Corporation Name  
**HALLANDALE FLOWER SHOP, INC.**

Principal Place of Business: **240 OLD FEDERAL HWY. HALLANDALE FL 33009**  
Mailing Address: **240 OLD FEDERAL HWY HALLANDALE FL 33009**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>05/21/1986</b>	3a. Date of Last Report <b>07/06/1994</b>
4. FEI Number <b>59-2676711</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 193 (1992 Florida Statutes) <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
24. Zip	29. Country
25. Country	30. Country

**9. Name and Address of Current Registered Agent**

**RUSKOWSKY, RONALD G.  
240 OLD FEDERAL HWY  
HALLANDALE FL 33009**

**10. Name and Address of New Registered Agent**

81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Signature, Title and Printed Name of registered agent and the Corporation) (NOTE: Registered Agent signature required when resigning)

**12. OFFICERS AND DIRECTORS**

TITLE	<b>P</b>
NAME	<b>RUSKOWSKY, RONALD G</b>
STREET ADDRESS	<b>810 N 72 TERRACE</b>
CITY, ST, ZIP	<b>HOLLYWOOD FL</b>
TITLE	<b>V</b>
NAME	<b>RUSKOWSKY, JOAN V</b>
STREET ADDRESS	<b>810 N 72 TERRACE</b>
CITY, ST, ZIP	<b>HOLLYWOOD FL</b>
TITLE	<b>S</b>
NAME	<b>CHURLY, KATHY</b>
STREET ADDRESS	<b>1833 PLUNKETT ST</b>
CITY, ST, ZIP	<b>HOLLYWOOD FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

**13. ADDITIONAL OFFICERS, DIRECTORS, AND SHAREHOLDERS**

11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	
14. CITY, ST, ZIP	
21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	
23. STREET ADDRESS	
24. CITY, ST, ZIP	
31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	
33. STREET ADDRESS	
34. CITY, ST, ZIP	
41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME	
43. STREET ADDRESS	
44. CITY, ST, ZIP	
51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME	
53. STREET ADDRESS	
54. CITY, ST, ZIP	
61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	
63. STREET ADDRESS	
64. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(A), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Joan V. Ruskowsky* *Ronald G. Ruskowsky* **6-30-95**  
(Signature and Typed or Printed Name of Secretary, Treasurer, or Director)

CR2E034 (3/95)