2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M54403

Entity Name: SPRING BOUQUET, INC.

FILED May 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

% ANA C. ARIAS

% ANA C. ARIAS 8140 NW 74TH AVE UNIT 16 8140 NW 74TH AVE

MEDLEY, FL 33166 MEDLEY, FL 33166

Current Mailing Address: New Mailing Address:

8140 NW 74TH AVE 8140 NW 74TH AVE UNIT 16 MEDLEY, FL 33166 US MEDLEY, FL 33166

FEI Number: 59-2822204 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARIAS, ANA ARIAS, ANA 8140 NW 74TH AVE 8140 NW 74TH AVE UNIT 16 MEDLEY, FL 33166 MEDLEY, FL 33166 US

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: ANA ARIAS 05/09/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

Address:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete ARIAS, ANA C., ARIAS, ANA C., Name:

8140 N.W. 74TH AVENUE Address: 8140 N.W. 74TH AVENUE UNIT 16

City-St-Zip: MEDLEY, FL 33166 City-St-Zip: MEDLEY, FL 33166

Title: VΡ Title: VΡ () Delete (X) Change () Addition

Name: ARIAS, HENRY Name: ARIAS, HENRY

8140 N.W. 74TH AVE Address: 8140 N.W. 74TH AVE UNIT 16 Address:

MEDLEY, FL 33166 MEDLEY, FL 33166 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANA ARIAS **PRES** 05/09/2006