

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90040 013 ***150.00

DOCUMENT # P00000029500

1. Entity Name
R&E FLORAL X-PRESS, INC.

Principal Place of Business

P.O. BOX 522324
 MIAMI FL 33152-2324

Mailing Address

P.O. BOX 522324
 MIAMI FL 33152-2324

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0993025**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ABREUS-GONZALEZ, SANDRA
8518 S.W. 8TH STREET, STE. 131
MIAMI FL 33144

7. Name and Address of New Registered Agent

Name **X Sandra Abreus - Gonzalez**
 Street Address (P.O. Box Number is Not Acceptable)
7371 N.W. 35 ST.
 City **Miami** FL **33122**

8. 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 **X Sandra Abreus - Gonzalez**
 5. Signatures, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

1/7/01
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PTD**
 NAME **ABREUS-GONZALEZ, SANDRA**
 STREET ADDRESS **8518 S.W. 8TH STREET, STE. 131**
 CITY - ST - ZIP **MIAMI FL 33144** ☐ Delete

TITLE **VSD**
 NAME **GONZALEZ, LEANDRA O**
 STREET ADDRESS **8518 S.W. 8TH STREET, STE. 131**
 CITY - ST - ZIP **MIAMI FL 33144** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
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TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD**
 NAME **Abreus - Gonzalez, Sandra**
 STREET ADDRESS **8335 Calle, Dr.**
 CITY - ST - ZIP **Miami, FL 33166** ☒ Change ☐ Addition

TITLE **VSD**
 NAME **Gonzalez**
 STREET ADDRESS **10775 NW 50th St.**
 CITY - ST - ZIP **Miami, FL 33178** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
 NAME
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TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X Sandra Abreus - Gonzalez**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/01
 Date

Daytime Phone #

CR2E034 (9/01)