2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000072648

Entity Name: HEAVEN SCENT FLORIST, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1366 ALT 19 3418 DEVONSHIRE DR. HOLIDAY, FL 34691 HOLIDAY, FL 34691

Current Mailing Address: New Mailing Address:

1366 ALT 19 3418 DEVONSHIRE DR. HOLIDAY, FL 34691 HOLIDAY, FL 34691

FEI Number: 59-3663426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SWANSON, CATHERINE
1301 JAMBALANA DR.
HOLIDAY, FL 34691
SWANSON, CATHERINE
3418 DEVONSHIRE DR.
HOLIDAY, FL 34691

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: CATHERINE SWANSON 04/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: SWANSON, CATHERINE Name:

 Name:
 SWANSON, CATHERINE
 Name:

 Address:
 3418 DEVONSHIRE DR
 Address:

 City-St-Zip:
 HOLIDAY, FL 34691
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CATHERINE SWANSON P 04/27/2004