ANNUAL REPORT

FILED DOCUMENT # P00000108273 Mar 26, 2005 08:00 AM Secretary of State 1. Entity Name ANDREA'S FLOWERS CORP. Mailing Address Principal Place of Business 1710 W. 68TH STREET 1710 W. 68TH STREET HIALEAH, FL 33012 HIALEAH, FL 33012 ວິດຈາກ ການສັນປາການ ຂໍ້ນວກເພື່ອນປະ The second of th The state of the s No Chg-P CR2E034 (10/03) 03212005 Applied For 4. FE! Number 65-1060413 Not Applicable \$8.75 Additional 5. Certificate of Status Desired, THE THE PARTY OF T Fee Required 6. Name and Address of Current Registered Agent at with the standard of the south of the standard of the stand LEAL, ANDREA N DO NOT WRITE 1710 W. 68TH STREET_ IN THIS SPACE HIALEAH, FL 33012 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D IIILE NAME LEAL, ANDREA N STREET ADDRESS 1710 W. 68TH STREET CITY-ST-ZIP HIALEAH, FL 33012 1100000277713 MILE NAME 03/26/05-80040-008 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP ... 05..0) '\$2..1.b24 K 'C63 THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP COMM RILE NAME STREET ADDRESS CITY-ST-789 I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 cath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDREA N LEAL : 03/21/05