

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000051272

FILED
Apr 24, 2002 8:00 AM
Secretary of State

Entity Name: BASKETS 'N BLOOM, INC.

Current Principal Place of Business:

5206 LAUREL POINTE DR.
VALRICO, FL 33594

New Principal Place of Business:

4915 COPPER CANYON BLVD.
VALRICO, FL 33594

Current Mailing Address:

5206 LAUREL POINTE DR.
VALRICO, FL 33594

New Mailing Address:

4915 COPPER CANYON BLVD.
VALRICO, FL 33594

FEI Number: 59-3720540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKART, KEVIN
600 1ST AVE. N, STE. 307
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

MCNAMARA, THOMAS P ESQ.
2909 BAY TO BAY BLVD.
SUITE 309
TAMPA, FL 33629 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: THOMAS P. MCNAMARA

04/24/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARBER, GINA M
Address: 5206 LAUREL POINTE DR.
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: LOFTIS, LAURIE A
Address: 2323 SOUTHERN LITES AVE.
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: HARBER, GINA M
Address: 4915 COPPER CANYON BLVD.
City-St-Zip: VALRICO, FL 33594

Title: DVP (X) Change () Addition
Name: LOFTIS, LAURIE A
Address: 2323 SOUTHERN LITES AVE.
City-St-Zip: LUTZ, FL 33549

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: GINA M. HARBER

P

04/24/2002

Electronic Signature of Signing Officer or Director

Date