

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000022606

Entity Name: PETALS & PETALS, INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

2626 NW 72ND AVENUE
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

PO BOX 227356
MIAMI, FL 33122

New Mailing Address:

FEI Number: 03-0397805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FAINI, GIOVANNINA
2626 NW 72ND AVENUE
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

FAINI, GIOVANNINA
P.O. BOX 227356
MIAMI, FL 33122 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:

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FAINI, GIOVANNINA
Address: 1601 S OCEAN DR #1105
City-St-Zip: HOLLYWOOD, FL 33019

Title: CEO () Delete
Name: DOYLE, RICHARD S
Address: 200 OCEAN LANE DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: CFO () Delete
Name: ESTEBAN, ARBOLEDA ENG
Address: 2626 NW 72 AVENUE
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FAINI, GIOVANNINA
Address: P.O. BOX 227356
City-St-Zip: MIAMI, FL 33122

Title: CEO (X) Change () Addition
Name: DOYLE, RICHARD S
Address: P.O. BOX 227356
City-St-Zip: MIAMI, FL 33122

Title: CFO (X) Change () Addition
Name: ESTEBAN, ARBOLEDA ENG
Address: P.O. BOX 227356
City-St-Zip: MIAMI, FL 33122

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: GIOVANNINA FAINI

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date