

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000015652

Entity Name: BLOOMING FLOWERS INC.

FILED
Dec 04, 2004
Secretary of State

Current Principal Place of Business:

65 HARBOR DRIVE
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

200 S. BISCAYNE BLVD.
2940
MIAMI, FL 33131

New Mailing Address:

FEI Number: 06-1677403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBRONT, CURT
200 S. BISCAYNE
2940
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OBRONT, CURT
Address: 200 S. BISCAYNE #2940
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CARDENAS, MARIA A PRESIDE
Address: 65 HARBOR DR.
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP () Change (X) Addition
Name: OBRONT, CURT VP
Address: 200 S. BISCAYNE BLVD, #2940
City-St-Zip: MIAMI, FL 33131 US

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: MARIA ANGELICA CARDENAS

PRES

12/04/2004

Electronic Signature of Signing Officer or Director

Date