

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 22, 2005 8:00 am
Secretary of State

07-22-2005 90022 017 ***150.00

DOCUMENT # P03000039421

1. Entity Name
COLLEGE PARK FLORAL & DESIGN, INC.



Principal Place of Business
4353 EDGEWATER DRIVE
ORLANDO, FL 32804

Mailing Address
1221 E ROBINSON ST
ORLANDO, FL 32801

50057128



06292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
45-0509851

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FONG, DAVID
1221 E ROBINSON ST
ORLANDO, FL 32801

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
NGUYEN, LAN TRAN
6612 MOGUL CT.
ORLANDO, FL 32805

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Languyen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-18-05 407²93-9436
Date Daytime Phone #

ATTACHMENT

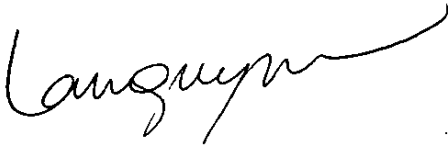
50057128

July 18, 2005

College Park Floral & Design Inc
4353 Edgewater Dr. Suite #2
Orlando, FL 32804
407-293-9436

Division of Corporations
Document # P03000039421
Dear Sir/ Madam,

My name is Lan Tran Nguyen, the owner of College Park Floral & Design Inc.
This is a first form to renew my annual report, from my CPA office. I never received
at my address, that why I wrote this letter to ask for a late fee waive of \$400.00 .
your help is very appreciated. Please accept my company check of \$150.00, and call
me anytime at 407-293-9436 if you have any question.
Thanks you very much.



Lan Tran Nguyen

PAID - If it is never received