2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067527

Entity Name: MARISOL FLOWERS, INC.

FILED Feb 08, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16351 MIRAMAR PKWY MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

16351 MIRAMAR PARKWAY MIRAMAR, FL 33027

FEI Number: 20-0049051 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BENITEZ, MARITZA MONSALVE, ORLANDO
16351 MIRAMAR PARKWAY 16351 MIRAMAR PARKWAY
MIRAMAR, FL 33027 US MIRAMAR, FL 33027 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: ORLANDO MONSALVE 02/08/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BENITEZ, MARITZA Name: BENITEZ, ENRIQUE

Address: 16351 MIRAMAR PARKWAY Address: 16351 MIRAMAR PARKWAY
City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: MIRAMAR, FL 33027

Title: VP () Delete Title: () Change () Addition

 Name:
 MONSALVE, ORLANDO
 Name:

 Address:
 16351 MIRAMAR PARKWAY
 Address:

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 BENITEZ, ENRIQUE
 Name:
 BENITEZ, MARITZA

 Address:
 16351 MIRAMAR PARKWAY
 Address:
 16351 MIRAMAR PARKWAY

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

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: ORLANDO MONSALVE VP 02/08/2005