

2004 FOR PROFIT CORPORATION ANNUAL REPORT

9/13/2004-90007-008-\$158.75-\$158.75

FILED

04 OCT -6 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07012004 Chg-P CR2E034 (10/03)

4. FEI Number **412109884** Applied For ☒ Not Applicable ☐

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

6. Name and Address of Current Registered Agent

COBB, MERCEDES
2745 NW 164 TERRACE
MIAMI, FL 33054

7. Name and Address of New Registered Agent

Name **NEW STATEMENT**
Street Address **NEW STATEMENT**
City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

FILE NOW! FEE IS \$550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	COBB, MERCEDES	
STREET ADDRESS	2745 NW 164 TERRACE	
CITY-ST-ZIP	MIAMI, FL 33054	
TITLE		☐ Delete
NAME	McIntosh, Marjorie	
STREET ADDRESS	3960 N.W. 135th St.	
CITY-ST-ZIP	Miami, FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V. President	☐ Change ☒ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), 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: Mercedes Cobb
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/05/04
Daytime Phone #

X Mercedes Cobb

8/05/04

1092

2082

Attachment
24084994
Division of Corporationswww.sunbiz.org

2004 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	P03000104755
Business Entity Name	DIVINE BLESSINGS DECORATING & GIFTS FOR ALL OCCASIONS, INC.
Original File Date	09/24/2003

FEI Number

Principal Address 2745 NW 164 TERRACE
MIAMI, FL 33054Mailing Address 2745 NW 164 TERRACE
MIAMI, FL 33054Registered Agent MERCEDES COBB
2745 NW 164 TERRACE
MIAMI, FL 33054 US

Officer/Director Name And Address

P
MERCEDES COBB
2745 NW 164 TERRACE
MIAMI, FL 33054

☒ After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

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