2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000135887

Entity Name: A BASKET OF FLOWERS BY SISTERS, INC.

FILED Apr 28, 2004 Secretary of State

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

2655 LEJEUNE RD., STE. 804 2655 LEJEUNE ROAD CORAL GABLES, FL 33134 SUITE 804

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2655 LEJEUNE RD., STE. 804 2655 LEJEUNE ROAD CORAL GABLES, FL 33134 SUITE 804

CORAL GABLES, FL 33134

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

KATES, LESTER G ESQ.
2655 LEJEUNE RD., STE. 804
CORAL GABLES, FL 33134

KATES, LESTER G ESQ.
2655 LEJEUNE ROAD
SUITE 804
CORAL GABLES, FL 33134

CONAL GABLES, I E 3313

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: LESTER G. KATES 04/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 JIMENO, NARDA
 Name:

 Address:
 412 S.W. 88TH PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33174
 City-St-Zip:

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: NARDA JIMENO D 04/28/2004