

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000083890

Entity Name: TWIN FLOWERS, INC.

FILED
Aug 26, 2009
Secretary of State

Current Principal Place of Business:

1611 N.W. 115 AVE
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

1611 N.W. 115 AVE
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 20-1180076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELENDEZ, GLADYS
622 N STATE ROAD 7
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

MELENDEZ, GLADYS
1520 S STATE RD 7
HOLLYWOOD, FL 33023 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: GLADYS MELENDEZ

08/26/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PROANO, LUIS
Address: 1611 NW 115 AVE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: DV () Delete
Name: CAICEDO, NELLY
Address: 1611 NW 115 AVE
City-St-Zip: PEMBROKE PINES, FL 33036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LUIS PROANO

DP

08/26/2009

Electronic Signature of Signing Officer or Director

Date