

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132929

Entity Name: FLOWERS BY ANA, INC.

FILED
Feb 10, 2008
Secretary of State

Current Principal Place of Business:

8795 BRIARWOOD MEADOW LANE
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

8795 BRIARWOOD MEADOW LANE
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 20-1646000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEINROTH, ROBERT S ESQ
7301A W PALMETTO PK RD SUITE 100C
BOCA RATON, FL 334333403 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: YAFFE, LORNE S
Address: 8795 BRIARWOOD MEADOW LANE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: YAFFE, ADRIANA H
Address: 8795 BRIARWOOD MEADOW LANE
City-St-Zip: BOYNTON BEACH, FL 33437

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: LORNE YAFFE

D

02/10/2008

Electronic Signature of Signing Officer or Director

Date