## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000148719

Entity Name: JAZMINE FLOWERS CORP.

FILED Jan 26, 2006 Secretary of State

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

9450 NW 12 STREET MIAMI, FL 33172 US

Current Mailing Address: New Mailing Address:

9450 NW 12 STREET MIAMI, FL 33172 US

FEI Number: 20-1812363 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:

 MARTINEZ-DIAZ, AMISADAY
 MENDEZ, LILLIAM

 19700 SW 103 COURT APT. 101
 18220 SW 90 COURT

 MIAMI, FL 33157
 US

 MIAMI, FL 33157
 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: LILLIAM MENDEZ 01/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MARTINEZ-DIAZ, AMISADAY
 Name:
 MENDEZ, LILLIAM

 Address:
 19700 SW 103 COURT APT. #101
 Address:
 18220 SW 90 COURT

 City-St-Zip:
 MIAMI, FL 33157 US
 City-St-Zip:
 MIAMI, FL 33157 US

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

 Name:
 LOPEZ, GIOVÁNNA MARIE
 Name:

 Address:
 4351 SW 149 CT
 Address:

 City-St-Zip:
 MIAMI, FL 33185 US
 City-St-Zip:

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

 Name:
 HERNANDEZ, RONALD R
 Name:

 Address:
 8411 CANVAS VEST CT
 Address:

 City-St-Zip:
 LAS VEGAS, NV 89113 US
 City-St-Zip:

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

 Name:
 MENDEZ, LILLIAM
 Name:

 Address:
 18220 SW 90TH COURT
 Address:

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LILLIAM MENDEZ PD 01/26/2006