2008 FOR PROFIT CORPORATION

Apr 25, 2008 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P05000051773 OCALA FLOWER SHOP, INC. Principal Place of Business Mailing Address 1317 S. PINE AVENUE 1317 S. PINE AVENUE OCALA, FL 34474 US OCALA, FL 34474 No Chg-P CR2E034 (11/05) 01242008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2639307 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PATTERSON, DEBORAH C DO NOT WRITE 5030 SE 41ST AVENUE OCALA, FL 34480 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE PATTERSON, DEBORAH C NAME STREET ADDRESS 5030 SE 41ST AVENUE OCALA, FL 34480 CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CHY-ST-ZIE TITLE NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE:

STREET ADDRESS CITY - ST- 7(P)

FILED