

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 20, 2007 8:00 am
Secretary of State

07-24-2007 90038 043 ***150.00

DOCUMENT # P05000145172	
1. Entity Name: MR. FLOWERS, INCORPORATED	

Principal Place of Business 771 MAIN STREET DUNEDIN FL 34698	Mailing Address 771 MAIN STREET DUNEDIN FL 34698
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country


203 55 4770
2nd MOORE CR2E034 (4/07)

4. FEI Number AP-PLIED FOR	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DOBERNIC, RONALD A 771 MAIN STREET DUNEDIN FL 34698	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

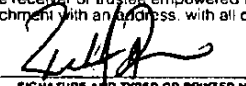
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$550.00 DUE BY September 5, 2007 Make Check Payable to Florida Department of State	S.607 193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOS DOBERNIC, RONALD A 2405 A 1 ST STREET INDIAN ROCKS BEACH FL 33785 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Ronald A. Dobernic** **7/12/07** **727-733-0402**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

- 7/17/07 - ATTACHMENT

Re.

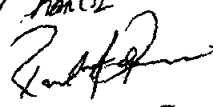
Mr. Flowers Inc. 66021086
P05 0000145172
Dear Revenue Officer Forward Report

We never received the original filing form.

The only form we received was the intent to
dissolve Post Cards.

We sent that in & received the filing form
7/16/07.

We talked with Gary at the revenue center
and are sending the \$150.00 for filing fee's

T. Banks

CEO

FED.
FEI
203554770