## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000006919

Entity Name: EL LIRIO DE LOS VALLES FLOWERS CORP.

FILED Aug 28, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

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

2350 W 84 STREET 2628 WEST 70 PL BAY A6 HIALEAH, FL 33016

HIALEAH, FL 33016

**Current Mailing Address: New Mailing Address:** 

2350 W 84 STREET 2628 WEST 70 PL BAY A6 HIALEAH, FL 33016 HIALEAH, FL 33016

FEI Number: 04-3840442 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:

LOPEZ, ISMARY QUEZADA TAX DEFENSE CENTER 8360 W 18 LANE 2350 WEST 84ST HIALEAH, FL 33014 SUITE 18 US HIALEAH, FL 33016 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: MONTANEZ ELYZABET 08/28/2007

> 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: () Delete Title: LOPEZ, ISMARY QUEZADA Name:

Name: QUEZADA, ISMARY 8360 W 18 LANE 2628 WEST 70 PL Address: Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip: HIALEAH, FL 33016

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

Name: LOPEZ, JUAN M Name: 8360 W 18 LANE Address: Address: HIALEAH, FL 33015 City-St-Zip: 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: ISMARY QUEZADA PD 08/28/2007