

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000074113

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** GREENS AND BLOOMS EVENT PLANNERS ON WHEELS CORPORATION

**Current Principal Place of Business:**

16379 COUNTRY LAKE CIRCLE  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

16379 COUNTRY LAKE CIRCLE  
DELRAY BEACH, FL 33484

**New Mailing Address:**

**FEI Number:** 20-4906048

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PHILIPPINE AMERICAN CHAMBER OF COMMERCE OF  
BOCA RATON AND THE PALM BEACHES INC.  
1600 SO. DIXIE HW. ROYAL PALM TOWERS #107  
BOCA RATON,, FL 33432 US

**Name and Address of New Registered Agent:**

PHILIPPINE AMERICAN CHAMBER OF COMMERCE OF  
BOCA RATON AND THE PALM BEACHES INC.  
6444 LA COSTA DRIVE #204  
BOCA RATON,, FL 33433 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: MARIA R. BARRAMEDA

04/30/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: UY, MONA LISA  
Address: 16379 COUNTRY LAKE CIRCLE  
City-St-Zip: DELRAY BEACH,, FL 33484

Title: VP ( ) Delete  
Name: UY, NATHANIEL JOSE  
Address: 16379 COUNTRY LAKE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33484

Title: DIRE ( ) Delete  
Name: UY, MONICA MAE  
Address: 16379 COUNTRY LAKE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33484

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MONA LISA UY

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date