## **2007 FOR PROFIT CORPORATION**

## **ANNUAL REPORT** DOCUMENT # D06000135423

## CTIE ST

**FILED** Sep 10, 2007 8:00 am Secretary of State

1. Entity Name ROSEMARY'S FLORAL & GOURMET GIFTS, INC							09-10-2007	90003 014	130	<i>.</i>
Principal Place of Business			Mailing Address	Mailing Address						
3015 ALOMA AVE WINTER PARK, FL 32792			9545 TOWER PINE DR Winter Garden, Fl 34787		• . •					
							<b>                                    </b>			
2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.		08102007	Chg-P	CR2E034 (1			
City & State			City & State			4. FEI Numb	1776696		<del></del>	plied For t Applicable
Zip Country		Zip Count		ntry	5. Certificate	of Status Desired		'5 Addi Required		
6. Name and Address of Current Registered Agent.					Namo	7. Name and	Address of New R	egistered Agent		
BLORE, KIM C					Name Street Address (P.O. Box Number is Not Acceptable)					
3015 ALOMA AVE WINTER PARK, FL <sup>®</sup> 32792										
!					City			FL Z	p Code	<del></del>
	named entiti ions of regist		or the purpose of changing it	s register	ed office or registe	ered agent, or bo	oth, in the State of Fic	orida. I am familia	ir with, a	and accept
SIGNATURE	Signature, typed	or printed name of registered agen	t and title if applicable (NO	TE. Registere	ed Agent signature require	ed when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00  Due by September 14, 2007  9. Election Campaign Finan Trust Fund Contribution.										
		•				i.00 May Be ded to Fees	In accordance v corporation did	with s. 607,193( not receive the	2)(b), i prior n	F.S., the otice.
		•	Trust Fund Cor		☐ Áde	ded to Fees	In accordance v corporation did /CHANGES TO OFF	not receive the	prior n	otice.
10.	P Set	officers and	Trust Fund Cor	11.	☐ Ádd	ded to Fees	corporation did	not receive the	prior n	otice.
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10.	P BLORE, H	OFFICERS AND	Trust Fund Cor	11. IIIL NAM	☐ Ádd	ded to Fees	corporation did	not receive the	CTORS	otice.
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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 ooth; 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: