

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000150906

Entity Name: MAGIC CITY FLOWERS, INC.

FILED
Jan 17, 2008
Secretary of State

Current Principal Place of Business:

2293 KEYSTONE BLVD
NORTH MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

2293 KEYSTONE BLVD
NORTH MIAMI, FL 33181

New Mailing Address:

FEI Number: 20-8189455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONATHAN J. LICHTMAN, P.A.
20283 STATE RD.7
SUITE 300
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

JEFFREY STEPHENS
2293 KEYSTONE BLVD
NORTH MIAMI, FL 33181 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: JEFFREY STEPHENS

01/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STEPHENS, JEFFREY
Address: 2293 KEYSTONE BLVD
City-St-Zip: NORTH MIAMI, FL 33181

Title: D () Delete
Name: STEPHENS, IVANA
Address: 2293 KEYSTONE BLVD
City-St-Zip: NORTH MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JEFFREY STEPHENS

D

01/17/2008

Electronic Signature of Signing Officer or Director

Date