2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# P07000005409

Entity Name: LENA'S FLOWERS & GIFTS, INC.

Current Principal Place of Business:

551 SW 16TH STREET
BELLE GLADE, FL 33430 US

New Principal Place of Business:

Current Mailing Address:

551 SW 16TH ST
BELLE GLADE, FL 33430 US

New Mailing Address:

FEI Number: 20-8273995 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, COREY P EA
2911 EAST MAIN STREET
PAHOKEE, FL 33476 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALI, GASSAN A
Address: 117 SE 5TH STREET N
City-St-Zip: BELLE GLADE, FL 33430 US

Title: VP ( ) Delete
Name: MOHAMAD, AMIN H
Address: 765 SOUTH MAIN ST
City-St-Zip: BELLE GLADE, FL 33430 US

Title: T ( ) Delete
Name: SAAD, ODEH K
Address: 608 ELPRADO DR #1
City-St-Zip: BELLE GLADE, FL 33430 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALI, IMAD
Address: 464 SW AVENUE E
City-St-Zip: BELLE GLADE, FL 33430 US

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

Title: T/S (X) Change ( ) Addition
Name: SAAD, ODEH K
Address: 608 ELPRADO DR #1
City-St-Zip: BELLE GLADE, FL 33430 US

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: IMAD ALI PRES 01/14/2009

Electronic Signature of Signing Officer or Director Date