

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000001117

Entity Name: FLORAL DESIGNS, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7382 NW 35 TERRACE  
MIAMI, FL 33122 US

**New Principal Place of Business:**

2291 NW 82ND AVENUE  
MIAMI, FL 33122 US

**Current Mailing Address:**

P.O. BOX 52-1021  
MIAMI, FL 331521021 US

**New Mailing Address:**

FEI Number: 36-4647257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CRICHTONMULLINGS & ASSOCIATES P.A.  
3350 SW 148TH AVENUE  
SUITE# 203  
MIRAMAR, FL 33027 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MULLINGS, DORNETT L  
Address: 1599 SW 159 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33027 US

I hereby 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 all other like empowered.

SIGNATURE: DORNETT MULLINGS

PRES

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date