FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000015363 (3)

FLOWERS CENTRAL, INC.

Principal Place of Business	Mailing Address
130 S CHARLES ST	130 S CHARLES ST

FILED Jan 26 1998 8:00am Secretary of State



130 8 CHARL DAYTONA BE	ES ST ACH FL 32114	130 S CHARLES ST Daytona Beach FL 3	2114		DO NOT WRITE IN THIS SPACE	
					3. Date incorporated or Qualified 02/22/1993	
2. Principal Place of Business 2a. Mailing Address			4. FEI Number Applied For			
21				59-3172641 Not Applicabl		
22		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Ζιρ	Country	′	8. This corporation owes or has paid the current year Inlangible	
24	25 g. Name and Address of Cur	rent Registered Agent	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
118	CAS, LAWRENCE E	Tont hogistorou Agent	81	Name		
	S CHARLES ST					
	YTONA BEACH FL 32114		82	Street	t Address (P.O. Box Number is Not Acceptable)	
			83			
				0		
			84	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE .	Signature, typed or printed name of registered	agent and title if applicable (NO	TE: Registered Age	nt signature	re required when reinstating) DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	DELET E	1.1 TITLE		☐ Change ☐ Addition	
NAME	LUCAS, LAWRANCE E.		1.2 NAME			
STREET ADDRESS	130 S. CHARLES ST		13 STREET	ADDRESS		
CITY-ST-ZIP	DAYTONA BCH FL		1.4 CITY - S			
TITLE	S SOPINIC PETU	DELETE	2.1 TITLE		S Lucas, Beth	
NAME	SPRINKLE, BETH 130 S. CHARLES ST		2.2 NAME		Lucas, Beln	
STREET ADDRESS	DAYTONA BOH FL		2.3 STREET			
CITY-ST-ZIP TITLE	SKITOWN BOTTLE	DELETE	2. 4 CITY - S 3.1 TITLE	T-ZIP	Change Addition	
NAME			3.2 NAME		Change	
STREET ADDRESS			3.3 STREET	AUUBEGG		
CITY-ST-ZIP			3.4. CITY-S			
TITLE	<u>-</u>	DELETE	4.1 TITLE	AM	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP	····		4.4 CITY - ST	I-ZIP		
TITLE		☐ DELETE	5.1 TITLE	- -	Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP	· -	Delete	5.4 CITY - ST	- ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition	
NAME CTREET ADDRESS			62 NAME	LOBBERS		
STREET ADDRESS			6.3 STREET			
CITY-ST-ZIP	ertify that the information supplied	with this filing does not qualify f	6.4 City-St or the exempt	ion state	Led in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
officer or d	on t his annual report or supplemei	ntal annual report is true and accepted to the second with an address.	curate and tha	it my sia	gnature shall have the same legal effect as if made under oath; that I am an s required by Chapter 607, Florida Statutes; and that my name appears in	