2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 05, 2007 08:00 A Secretary of State DOCUMENT # P93000043995 1. Entity Name FLORAL OCCASIONS, INC. Principal Place of Business Mailing Address 4150 HOGSHEAD ROAD P 0 BOX 670 PLYMOUTH, FL 32768 PLYMOUTH, FL 32768 IJS 03152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3212027 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOGSHEAD, RODNEY C DO NOT WRITE 4150 HOGSHEAD ROAD PLYMOUTH, FL 32768 IN THIS SPACE 8. 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. Lam familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HOGSHEAD, RODNEY C III STREET ADDRESS 4150 HOGSHEAD RD CITY-ST-ZIP PLYMOUTH, FL 32768 U000000691361 04/13/07-80007-020 150:00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the examptions contained 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 signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the requiremental report to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in , Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachr

SIGNATURE:

"STREET ADDRESS CITY-ST-7IP