

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000053545

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** SEAFLOWERS ENTERPRISES, INC.

**Current Principal Place of Business:**

6900 PERSHING AVENUE  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 940845  
MAITLAND, FL 32794 US

**New Mailing Address:**

**FEI Number:** 59-3195741

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAIGE, PATRICIA  
513 BARCLAY AVENUE  
ALTAMONTE SPRINGS, FL 32701 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: PD  
Name: GAIGE, PATRICIA  
Address: 513 BARCLAY AVENUE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 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: PATRICIA GAIGE

MS

03/17/2011

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

\_\_\_\_\_  
Date