2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000077326

Entity Name: FLORISCAPE, INC.

FILED Jul 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5250 LUNA VISTA DR 17205 MONTEVERDE DRIVE NEW PORT RICHEY, FL 34652 SPRING HILL, FL 34610

Current Mailing Address: New Mailing Address:

5437 AVERY ROAD 17205 MONTEVERDE DRIVE NEW PORT RICHEY, FL 34652 SPRING HILL, FL 34610

FEI Number: 59-3214470 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

FREDA, JOHN
5437 AVERY RD
FREDA, JOHN
17205 MONTEVERE

5437 AVERY RD 17205 MONTEVERDE DRIVE NEW PORT RICHEY, FL 34652 US SPRING HILL, FL 34610 US

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: 07/06/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVP () Delete Title: PVP (X) Change () Addition

 Name:
 FREDA, JOHN
 Name:
 FREDA, JOHN

 Address:
 5437 AVERY ROAD
 Address:
 17205 MONTEVERDE DRIVE

City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: SPRING HILL, FL 34610

Title: ST () Delete Title: ST (X) Change () Addition

Name: FREDA, TERESA Name: FREDA, TERESA

Address: 5437 AVERY ROAD Address: 17205 MONTEVERDE DRIVE City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: SPRING HILL, FL 34610

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TERESA S FREDA ST 07/06/2004