FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

'CORPORATION . ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P93000083094 (1) DOCUMENT #

BRADENTON FLOWER SHOP & GIFTS, INC.									
Principal Place o	of Business	Mailing Address					ı 80ist 06101 1011	,0 mm 10 11	18 1811) A161 1881
2550 26TH STREET W 2550 26TH STREET BRADENTON FL 34205 BRADENTON FL 342			•						
						3. Date Incorporated or Qualified 12/02/1993	3a. Date o	of Last Re /13/19	
Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number 65-0448143	<u> </u>		Applied For Not Applicable
Suite, Apt. #,	etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Oily & State		City & State				Election Campaign Financing Trust Fund Contribution			May Be
 Zip 	Country 25	7ip	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
	9. Name and Address of Curre		1551	Γ.—		10. Name and Address of New R	egistered A	gent	
			,	81	Name				
HOPKINS, VALERIE A 2550 26TH STREET W				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	TON FL 34205			83					
				84	City		FL	85 Z	p Code
2.	OFFICERS AND DIRECTORS STD DELETE			13.		I wheel regulating: ADDITIONS/CHANGES TO OFF		DIRECTO Change	
IILE AME	HOPKINS, VALERIE A	☐ DELETE	☐ DELETE 1.11					Change	☐ Addition
HEFT ADDRESS HY-SE-ZP	2550 26TH STREET W BRADENTON FL 34205				ADDRESS IT-ZIP				
น	PD HARK E	DETELE	1					} Change	Addition
Mt	HOPKINS, MARK E		22 N						
HEF! ADDRESS	2550 26TH STREET W BRADENTON FL 34205				ADDRESS				
TY ST, ZIE	DIVIDENTION I L 34203	DELETE	24C 3 1 1		ST - ZIP] Change	Addition
ME			32 N						
RELITATIONESS					T ADDRESS				
1Y - S.L - 7(P			34C	ITY-S	57 - ZIP				
IU		☐ DELETE	4.11] Change	Addition
NME .			42 N		15.0050				
REFLADORESS					ADDRESS				
TF ST-ZP		DELETE		HIY-S TITLE	ST - ZIP			7 Change	☐ Addition
Mi				AME			_		_
REFT ADDRESS					I ADDRESS				
15 - S1 - ZIF					ST-ZIP				
FLF		DELETE		TITLE				Change	☐ Addition
AME			621	NAME					
TREET ADDRESS			635	STREET	I ADDRESS				
(11 - S1 - ZiP			640	OTY - 5	ST - ZIP				4 14. 22
Cth - S1-Zif 14. I do hereby certify that path; that I	the information indicated on this an	nual report or supplemental ar poration or the receiver or trust	640 rmished and noual report tee empowe	CIY-S	ST-ZIP es not qualify f	or the exemption stated in Section 118 ate and that my signature shall have the s report as required by Chapter 607, F	e same legal e	effect as	if mad

SIGNATURE:)

UALERIE A HOPKINS 3/9/96 941- 193.4554