

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90156 032 ***150.00

DOCUMENT # P94000030446

1. Entity Name

FLOWER ON THE PROMENADE, INC ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
19101 SW 61ST MANOR
Suite, Apt. #, etc.

3. Mailing Address
19101 SW 61ST MANOR
Suite, Apt. #, etc.

City & State
SOUTHWEST RANCHES, FL
Zip 33332 Country USA

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SOUTHWEST RANCHES, FL
Zip 33332 Country USA

4. FEI Number 65-0844553

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name George P. Joseph III

Street Address (P.O. Box Number is Not Acceptable)

19101 SW 61ST MANOR

City SOUTHWEST RANCHES FL Zip Code 33332

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.

SIGNATURE [Signature]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/25/02
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE OFFICER
NAME GEORGE P. JOSEPH III
STREET ADDRESS 19101 SW 61ST MANOR
CITY-ST-ZIP SOUTHWEST RANCHES, FL 33332

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE OFFICER
NAME ROSEMARIE DIELLA
STREET ADDRESS 1242 CANARY ISLAND DR
CITY-ST-ZIP WESTON, FL 33327

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13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02
Date

(305) 715-9913
Daytime Phone #

CR2E034B (12/01)