

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000043155

Entity Name: BLOOMING GARDENS, INC.

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

20462 OLD CUTLER RD.  
MIAMI, FL 33189

**New Principal Place of Business:**

**Current Mailing Address:**

20462 OLD CUTLER RD.  
MIAMI, FL 33189

**New Mailing Address:**

FEI Number: 65-0497053

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILSON, BARBARA W PRES  
20462 OLD CUTLER RD.  
MIAMI, FL 33189 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: PTD  
Name: WILSON, BARBARA W  
Address: 20462 OLD CUTLER RD.  
City-St-Zip: MIAMI, FL 33189

Title: SD  
Name: WILSON, RICHARD S SR  
Address: 20462 OLD CUTLER RD.  
City-St-Zip: MIAMI, FL 33189

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: BARBARA W WILSON

PRES

04/16/2012

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

\_\_\_\_\_  
Date