

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000080314

FILED
Mar 20, 2006
Secretary of State

Entity Name: BOTANICA INTERNATIONAL FLORIST, INC.

Current Principal Place of Business:

2616 S. MACDILL AVE.
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

2616 S. MACDILL AVE.
TAMPA, FL 33629

New Mailing Address:

FEI Number: 59-2922879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHECHT, NEIL S
3426 W. KENNEDY BLVD.
TAMPA, FL 33609 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PROSSER, FIONA
Address: 3208 BARCELONA ST.
City-St-Zip: TAMPA, FL 33629

Title: S () Delete
Name: PROSSER, IAN
Address: 3208 BARCELONA ST.
City-St-Zip: TAMPA, FL 33629

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PROSSER, FIONA
Address: 824 LUMSDEN RESERVE DR
City-St-Zip: BRANDON, FL 33511

Title: S (X) Change () Addition
Name: PROSSER, IAN
Address: 824 LUMSDEN RESERVE DR
City-St-Zip: BRANDON, FL 33511

Title: T () Change (X) Addition
Name: SUTTERBY, AYMEE V
Address: 1621 GRAND HERITAGE BLVD
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: FIONA PROSSER

D

03/20/2006

Electronic Signature of Signing Officer or Director

Date