## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000019525 (1)

FLORIST DIRECT INC.

Principal	Place	ΟÍ	Business
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4482 NW 74TH AVE

Mailing Address

4462 NW 74TH AVE

## FILED Apr 30 1997 8:00am Secretary of State



MINMI PL 00100	•	MIMMI PL 33100-04-3						
					3. Date Incorporated or Qualified 03/09/1995	1	e of Last 2/1996	Report
2. Principal Pl 21 9450 1	lace of Business NW 12TH STREET	2a. Mailing Address 26 9450 NW 12	TH STE	RET	4. FEI Number			Applied For
Suite. Apt. #. etc.		Suite, Apt. #, etc.			65-0565152			Vol Applicable
e2		<u>├</u> ¬	27		5. Certificate of Status Desired			Additional Regulred
City & State		City & State	- <b>4</b> E is a long to the contract of the contr		Election Campaign Financing			0 May Be
23 MIAMI, FL		28 MIAMI, FL	28 MIAMI, FL		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Cour	itry	8. This corporation has liability for i			s. 199.032,
<u>24 33172</u>	25 USA	33172	30	USA		Yes 🔀		
	9, Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New Re	gistered A	gent	
	IYERS, ROBERT M			81 Name				
	08 S.W. 46TH TERRACE		<u> </u>	82 Street	Address (P.O. Box Number is Not Acceptab	olo)		
APT.	_		-	83			<del></del>	
MIAN	MI FL 33175			63				
			Ī	84 City		[-]	<b>85</b> Zip	Code
11 Pureuant t	to the provisions of Sections 607.00	-02 and 607 1508 Florida State	toe the ab	ovo nacod	correction submits this statement for the p	r F L	honoina	Ito registered
office or re agent. I ar	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was gations of, Section 607.0505, F	authorized lorida Statu	by the con	corporation submits this statement for the poration's board of directors. I hereby acceptions	of the appoi	ntment a	s registered
SIGNATURE	Signature, typed or printed name of registered a	gent and lifte if applicable (NO	)11 Feoglistered	Agent signature	required when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	P	∐ DELETE	1 1 1 1 1 7			L	X Change	Addition
NAME	CONYERS, ROBERT M		12 NAI	-	9450 NW 12TH STREET			
STREET ADDRESS	4462 N.W. 74TH AVENUE		1	EET ADDRESS	MIAMI, FL. 33172			
CITY-ST-ZIP TITLE	MIAMI FL 33166 VP	DELETÉ	2.1 TITI	Y-ST-7IP	111111111111111111111111111111111111111		<b>X</b> Change	Addition
NAME	CONYERS, SUE A	Deterio	2.2 NA			L.	A Grange	[] Monition
STREET ADDRESS	4462 N.W. 74TH AVENUE		. E	vi: Ee1 address	9450 NW 12 STREET			
CITY-ST-ZIP	MIAMI FL 33166			Y - \$1 - 7IP	MIAMI, FL. 33172			
TITLE	ŜT.	DELETE	31 111		, , , , , , , , , , , , , , , , , , , ,	¥	Change	Addition
NAME	KANTAKIS, GEORGE		3.2 NAI	AE			_ •	
STREET ADDRESS	4462 N.W. 74TH AVENUE		3.3 STF	EET ADDRESS	9450 NW 12TH STREET			
CITY-ST-ZIP	MIAMI FL 33166		3.4 CIT	Y - S1 - ZIP	MIAMI, FL. 33172			
TITLE		DELETE	4.1 1111	F			Change	Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 S18	EET ADDRESS				
CITY-ST-ZIP				Y · ST · ZIP				
TITLE		☐ DELETE	5.1 TITS			L	Change	Addition
NAME			5.2 NAI					
STREET ADDRESS				EF1 ADDRESS				
CITY-ST-ZIP TITLE		DELETE		Y - ST - 7IP			T Change	A state :
			611111			L	Change	Addition
NAME OTDGGT ADDRESS			6.2 NAM					
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP			64 CIT	Y-S1-7IP				

14. I do 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 annual repert or supplemental annual 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 carboration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, of on an exact many light an address.