

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

FILED
May 12 1997 8:00am
Secretary of State

DOCUMENT # P95000066808 (3)

1. Corporation Name

FLOWERS & GIFTS OF ALTAMONTE INC.



Principal Place of Business

478 EAST ALTAMONTE DRIVE
SUITE 110
ALTAMONTE SPRINGS FL 32701

Mailing Address

478 EAST ALTAMONTE DRIVE
SUITE 110
ALTAMONTE SPRINGS FL 32701-4615

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

08/29/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

APPLIED FOR 59-340167

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

CHIN, FRANK
478 EAST ALTAMONTE DRIVE
SUITE 110
ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Brenda Chin VP

(NOTE: Registered Agent signature required when reinstating)

4/26/97

12. OFFICERS AND DIRECTORS

1.1 TITLE

NAME
CHIN, FRANK
STREET ADDRESS
478 EAST ALTAMONTE DRIVE, SUITE 110
CITY-ST-ZIP
ALTAMONTE SPRINGS FL 32701

1.2 TITLE

NAME
CHIN, BRENDA
STREET ADDRESS
478 EAST ALTAMONTE DRIVE, SUITE 110
CITY-ST-ZIP
ALTAMONTE SPRINGS FL 32701

1.3 TITLE

NAME
CHIN, NATASHA
STREET ADDRESS
478 EAST ALTAMONTE DRIVE, SUITE 110
CITY-ST-ZIP
ALTAMONTE SPRINGS FL 32701

1.4 TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.5 TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.6 TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 report 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Brenda Chin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/97

Date

407 834 6002

Daytime Phone #

0060014

CR2E034 (9/96)