

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000001898

FILED  
Apr 21, 2004  
Secretary of State

**Entity Name:** A BASKET AND FLORAL AFFAIR, INC.

**Current Principal Place of Business:**

10905 SATELLITE BLVD SUITE A  
ORLANDO, FL 32837 US

**New Principal Place of Business:**

10905 SATELLITE BLVD  
SUITE A  
ORLANDO, FL 32837 US

**Current Mailing Address:**

P.O. BOX 690216  
ORLANDO, FL 32869 US

**New Mailing Address:**

**FEI Number:** 59-3355944      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

LAMPONE, ANNE  
10905 SATELLITE BLVD SUITE A  
ORLANDO, FL 32837

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

LAMPONE, ANNE  
10905 SATELLITE BLVD  
SUITE A  
ORLANDO, FL 32837

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: ANNE LAMPONE

04/21/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LAMPONE, ANNE  
Address: 10905 SATELLITE BLVD SUITE A  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANNE LAMPONE

DIR

04/21/2004

Electronic Signature of Signing Officer or Director

Date