2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000030036

Entity Name: BLOOMSXPRESS, INC.

FILED Jul 10, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
1200 NW 78TH AVE			8323 NW 12TH STREET	
210/211 MIAMI, FL	33126		100 MIAMI, FL 33126	
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
1200 NW 210/211	78TH AVE		8323 NW 12TH STRI 100	EET
MIAMI, FL	33126		MIAMI, FL 33126	
FEI Numbe	:: 65-0742450 I	El Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Cur	rent Registered Agent:	Name and Address	of New Registered Agent:
1231 101 MIAMI, FL The above	33154 US	mits this statement for the	purpose of changing its register	ed office or registered agent, or both
	RE:	Signature of Registered Ag	ent	Date
SIGNATU In accordar	RE: Electronic and the state of	(b), F.S., the corporation did n		Date
SIGNATU In accordar Election Ca	RE: Electronic and the state of	(b), F.S., the corporation did nust Fund Contribution ().	ot receive the prior notice.	Date BES TO OFFICERS AND DIRECTO
SIGNATU In accordar Election Ca	RE: Electronic States with s. 607.193(2) The maign Financing Tr	(b), F.S., the corporation did nust Fund Contribution (). RS: lete RRY	ot receive the prior notice.	
SIGNATU In accordar Election Ca OFFICER Title: Name: Address:	RE: Electronic of Electronic o	(b), F.S., the corporation did nust Fund Contribution (). RS: lete RRY 33154 lete DCIRCLE	ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTO
In accordar Election Ca OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic State Michael Michael State Michael State Michael State Michael Micha	(b), F.S., the corporation did nust Fund Contribution (). RS: lete RRY 33154 lete CIRCLE Solution	ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	SES TO OFFICERS AND DIRECTO () Change () Addition

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: LARRY ABRAMOWITZ PRES 07/10/2006