

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90223 017 ***158.75

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000016347			
1. Entity Name MARYFLOWER, INC.			
Principal Place of Business 82 EASTWINDS COURT PALM HARBOR, FL 34683		Mailing Address 82 EASTWINDS COURT PALM HARBOR, FL 34683	
2. Principal Place of Business 1301 GREENLEA DR Suite, Apt. #, etc.		3. Mailing Address P.O. BOX 1195 Suite, Apt. #, etc.	
City & State HOLIDAY, FL		City & State TARPON SPRINGS, FL	
Zip 34691 Country USA		Zip 34688 Country U.S.A.	
4. FEI Number 59-3426450		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent KASTRITSOS, MARIA 82 EASTWINDS COURT PALM HARBOR, FL 34683		7. Name and Address of New Registered Agent Name KASTRITSOS, MARIA Street Address (P.O. Box Number is Not Acceptable) 1301 GREENLEA DR City HOLIDAY FL Zip Code 34691	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Maria Kastritsos</i></u> DATE <u>3/20/03</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when resigning.)			
FILE NOW! FEE IS \$150.00 After May 1, 2003 Fee will be \$250.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD KASTRITSOS, MARIA 82 EASTWINDS COURT PALM HARBOR, FL 34683 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☐ Addition 1301 GREENLEA DR HOLIDAY FL 34691	
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD KASTRITSOS, MARIA 82 EASTWINDS COURT PALM HARBOR, FL 34683 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☐ Addition 1301 GREENLEA DR HOLIDAY FL 34691	
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Maria Kastritsos</i></u> MARIA KASTRITSOS PD		Date <u>3/20/03</u> 727-938-4938 Daytime Phone #	

CR2E034 (10/02)