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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Moytham 🦂

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

FOUNTAINBLUE FLORIST, INC.

Principal Place of Business

Mailing Address

300 Palm Avenue

309 raim avenue Same					
Hialeah, F1. 33010				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified
į					6/21/97
2. Principal F	Place of Business	2a. Mailing Address			4 FEI Number
	as Above	26 Same as Above			65-0759678   Noi Applicable
Suite. Apt	#. etc	Suite. Apt. #, etc.			— \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Stat	е	City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Ζιρ	Country	Zip	Cour	itry	8. This corporation owes or has paid the current year Intangible
24	25	29	30]		Personal Property Tax due June 30. 🔲 Yes 🔲 No
Name and Address of Current Registered Agent     B1 Name					10. Name and Address of New Registered Agent
GEORGE ROD				81 Name	JULIO B. DE CARDENAS
19286 SW 5th Street			1	32 Stroot	! Address (P.O. Box Number is Not Acceptable)
Pembroke Pines, F1. 33029			į.	33	liramar, Florida 33023
			ļ.	34 City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607 0502	and 607 1608 Florida Statut	oc the abo	wo-named	
11. Pursuant to the previsions 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. Output, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, any other productions of, Section 607,0505. Florida Statutes.					
SIGNATURE Signature by a signature of grant and approach (NOTE Registered Agent) signature required when reinstating)  DATE  DATE					
12.	OFFICERS AND		13.	agi in sig tatur.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	<del></del>	77 DELETE	11100	F	Change Traddition
NAME	Margarita Barriga,		1.2 NAM	1ř	JULIO B. DE CARDENAS, President
STREET ADDRESS	19286 SW 5th Street			EET ADDRESS	6990 SW 28th STreet
CITY-ST-ZIP	Pembroke Pines, Fl.	33029		- \$1 - 7IP	Miramar, F1. 33023
TITLE		XXXDELETE	2 1 1111		☐ Change X X Addition
NAME	George Rod, Secreta	ıry	2 2 NAM	1E	ANNELI DE CARDENAS, Secretary
STREET ADDRESS	19286 SW 5th Street			ET ADDRESS	6990 SW 28th Street
CITY-ST-ZIP	Damburdo Dinas El 22000			Y-ST-ZIP Í	Miramar, F1. 33023
TITLE		DELETE		01 211	☐ Change ☐ Addilion
NAME			3.2 NAV	IE .	g- Gaz Fraurigh
STREET ADDRESS			3 3 S1RE	ET ADDRESS	
CITY-ST-ZIP				/- ST - 7IP	
TITLE		☐ DELETE	4.1 TUL		☐ Change ☐ Addition
NAME			4. 2 NAN	1E	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY+ST-ZIP			4.4 CITY	-\$1 - ZIP	
TITLE		☐ DILETE	5 1 111 (		☐ Change ☐ Addition
NAME			5.2 NAM	E	
STREET ADDRESS			5351RE	ET ADDRESS	
CITY-ST-ZIP			5.4 C:1Y	- \$1 - 7IP	
TITLE		☐ DELETE	6 1 7 17 1		Change Addition
NAME			62 NAM	E	000002509500 -05/04/9801057029 p ( \$\land \]
STREET ADDRESS			63 STRE	ET ADDRESS	-05/04/9801057029 () ( S\\
CITY-ST-ZIP			6.4 CITY	- S1 - 7:P	***150.00

14. Thereby 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 airrual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address.

SIGNATURE:

**FILED** 

May 01 1998 8:00am

Secretary of State