

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000055683

**FILED**  
**May 10, 2010**  
**Secretary of State**

**Entity Name:** POOPIE DOLL FLORIST, INC.

**Current Principal Place of Business:**

899 NORTHEAST 62ND STREET  
FORT LAUDERDALE, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

899 NORTHEAST 62ND STREET  
FORT LAUDERDALE, FL 33334

**New Mailing Address:**

**FEI Number:** 65-0761162

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LASHBROOK, PAUL N  
315 SOUTHEAST 7TH STREET  
SUITE 200  
FORT LAUDERDALE, FL 33301 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: ANTONIA ZELASKO  
Address: 5820 NE 21ST AVE  
City-St-Zip: FT LAUDERDALE, FL 33308

I hereby 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 all other like empowered.

**SIGNATURE:** ANTONIA ZELASKO

PTD

05/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date