Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90055 023 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700078909

YES FLOWERS, INC.

	<u></u>					B ail (bíú i sacin inik i	
Principal Place of Business Mailing Address							
1200 NW 22ND	STREET	1200 NW 22ND STREET					
#104		#104			DO NOT WRITE IN THIS SPACE		
MIAMI FL 33142 MIAMI FL 33142					3. Date Incorporated or Qualifed		
					09/11/1997		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Anı	plied For
		— ·		65-0780443		Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03 0700-10	\$8.75 A		
· · · · · · · · · · · · · · · · · · ·		27		5. Certifcate of Status Desired	Fee Re		
City & State			City & State		6. Election Campaign Financing	\$5.00	Han Da
		28		Trust Fund Contribution	Added to	- 1	
Zip Country		Zip Country		8. This corporation owes the current year Intangible			
			30		Personal Property Tax.	∏ Yes	ŽΝο
24	9. Name and Address of Curr		<u>v</u>		10. Name and Address of New Register		
	3. Name and Address of Curr	ent Registered Agent	81	Name	· · · · · · · · · · · · · · · · · · ·		
PFR	ez, osvaldo jr						
1200 NW 22ND STREET			82	Street	Address (P.O. Box Number is Not Acceptable)	• • • •	
#104			83				
	M FL 33142		03			•	ļ
INITAL	WITE 33142	•	84	City		85 Zip C	ode
						-L	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	s, the above	e-named	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	∍ of changing its i pointment as rec	registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Florid	la Statutes	i.		-	,
SIGNATURE							
	Signature, typed or printed name of registered		<u> </u>	nt signature r	equired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	DELETE 1.1 T				.[_] Change	Addition
NAME .	Perez, osvaldo sr	1.2 N				•	
STREET ADDRESS	2.00 077		1.3 STREE	T ADDRESS		-	ļ
CITY-ST-ZIP			1.4 CITY-S	T-ZIP			
TITLE	SD	☐ DELETE	2.1 TITLE		PDS	X Change	Addition
NAME	Perez, osvaldo jr	221			PEREZ, OSVALDO, JR.		}
STREET ADDRESS	4000 OM OFTI TEDD		2.3 STREET ADDRESS		1308 SW 25TH TERR.		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		MIAMI, FL. 33165		
TITLE	T	☐ DELETE	3.1 TITLE	7.4		Change	☐ Addition
NAME	DIAZ, ROMAN		3.2 NAME			*	j
STREET ADDRESS	1200 NW 22ND ST	•		TADDRESS			ĺ
CITY-ST-ZIP	MIAMI FL 33142		3.4. CITY-5				
TITLE	VS	☐ DELETE	4.1 TITLE	11-ZI		☐ Change	Addition
NAME	PEREZ. CARIDAD AIMEE	,	4. 2 NAME	i			-
	·			T ADDDESS	•	•	
STREET ADDRESS	1200 NW 22ND AVE		1	T ADDRESS		*	}
CITY-ST-ZIP	MIAMI FL 33142	☐ DELETE	4.4 CITY-S	1-ZIP		☐ Change	☐ Addition
TITLE		□ oerete	5.1 TITLE 5.2 NAME		_		
NAME	,			T ADDDCCC	·	ě,	
STREET ADDRESS				TADDRESS	,]
CITY-ST-ZIP			5.4 CITY-S	I-ZIP		<u> </u>	
TITLE	1	☐ DELETE	6.1 TITLE			Change	☐ Addition

14. 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 annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

OSVALDO PEREZ, JR.

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-7IP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP