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

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT DE STATE

FILED

Apr 23 1998 8:00am

Secretary of State

☐ Change

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Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000093016 (8) DOCUMENT #

FLOWERS & LINENS EMPORIUM, INC.

Principal Place of Business Mailing Address **671 NIGHTINGALE AVE** 671 NIGHTINGALE AVE MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/29/1997 2. Principal Place of Business 2s. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc Suite, Apl. #, elc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name QUIRANTES, MIRTA L **671 NIGHTINGALE AVE** 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI SPRINGS FL 33166 В3 84 11. Pursuant to the provisions of Sections 607 0302 and 007.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or regulated a party or both in the State of Central Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lany familiar and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATUR (NOTE_Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELLITE THE 1.1 THEF NAME BALAEZ, MELBA B STREET ADDRESS 10831 SW 75 STREET 1.3 STREET ADDRESS **MIAMI FL 33173** CITY - \$1 - 71P 1.4 CITY - ST - ZIP DELETE Chapoe Addition TITLE 2 1 TITLE **QUIRANTES, MIRTA** NAME 22 NAME STREET ADDRESS **671 NIGHTINGALE AVE** 23 STREET ADDRESS MIAMI SPRINGS FL 33166 CHTY - ST - ZIP 2 4 CITY - ST - 7IP DELETE Change Addition 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP 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 annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify to be exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify to be exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify to be exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information i

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SIGNATURE:

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STREET ADDRESS CITY - ST - ZIP

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CITY-SI-ZIP

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TITLE