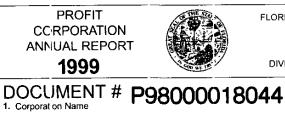
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CCRPORATION** ANNUAL REPORT

1999

KEY WEST FLORIST, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90066 004 \*\*\*150.00



Principal Place of Business Mailing Address							t in Artwar fill i findt i fait mitte an	)  )	(F) 1) <b>44</b> ( 1 <b>6</b> F)		111 E181 1981
1113 KEY PLAZI KEY WEST FL 3		1113 KEY PLAZA SPACE 23 KEY WEST FL 33040				DO NOT WR	ITE IN TH	S SPACI	E		
						3.	. Date Incorporated or Qualifed				
							02/23/1998				
2. Principal Pla	ace of Business	2a. Mailing Address				4.	. FEI Nu nber			App	ied For
21		26					65-0813326				Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, e	tc.			5.	. Certificate of Status Desired				ditional
22		27								ee Rec	
City & State	9	City & State				6.	<ul> <li>Election Campaign Financing</li> <li>Trust Fund Contribution</li> </ul>		•	OU N	lay Be
Zip	Coun.ry	Zip		untry	<del></del>	-	. This corporation owes the cur	rent vear			1.603
<b>─</b> ┐ ˙	25	29	30	u ,		0.	Personal Property Tax.	GIR YEAR	Ye:		No
24	9. Name and Address of Current		1301	Т	<del></del>	10.	. Name and Address of New	Registere	d Agent		
				81	Name						
	TIN, DEBORAH			82	Street Addr	ress (F	P.O. Box Number is Not Accept	able)			
29361 COOCNUT PALM DR					- Caroli / Iou	.,				_	
BIG F	PINE KEY FL 33043			83							
				84	City				. 85	Zip C	ode
					1			<u>F</u>	L		<del> </del>
office or re agent. ar	to the provisions of Sections 607.0502 agistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change	: was authorize	d by	the corporation	on's be	poard of cirectors. I hereby acce	pt the app	ointment	as reg	stered
SIGNATURE	Signature, typed or printed na ne of registered agent	and title if applicable	(NOTr: Registere	d Agen	nt signature require			DATE			
12.	OFFICERS AND	DIRECTORS	13.				ADDITIONS/CHANGES TO OF	FICERS			
TITLE	President	☐ DELI	ETE 1,1 T	ITLE					☐ Ch	ange	☐ Addition
NAME	George W. Niles		121	IAME							
STREET ADDRE 3S	348 46th Street		1.3 9	TREET	TADDRESS						
CITY-ST-ZIP	Summerland Key, FL	<u>, 33042                                  </u>		ITY-S	T- ZIP				. ☐ Ch	2000	Addition
TITLE	Vic-President	☐ DEL	1							ange	Addition
NAME	Sonia A. Niles			AME							
STREET ADDRESS	348 46th Street	22042			T ADDRESS						
CITY-ST-ZIP	Summerland Key, FL	<u>33042</u> □ DEL		CITY-S	51-ΔIP				Ch	ange	Addition
NAME :	Vice-President Richard K. Martin	_ 522		IAME						-	_
STREET ADDRESS	29 <b>3</b> 61 Coconut Palm	Drive			TADDRESS						
CITY-ST-ZIP	Big Pine Key, FL 3			CITY-S							_
TITLE	Secretary/Treasure			ITLE					Ch	ange	Addition
NAME	Deborah E. Martin	L	4. 2	NAME							
STREET ADDRESS	29361 Coconut Palm	Drive	4.3.5	TREET	T ADDRESS						
CITY-ST-ZIP	Big Pine Key, FL		440	TY-S	T-ZIP						
TITLE	Dig Time Key, Ph	33043 DEL		TLE					☐ Ch	ange	☐ Addition
NAME				IAME							
STREET ADDRESS					T ADDRESS						
CITY-ST-ZIP				ITY-S	T-ZIP						
TITLE		☐ DEL							Ch	ange	Addition
NAME				AME							
STREET ADDRESS			6.3 9	TREET	T ADDRESS						

CITY-ST-ZIP 14. Therety 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 changes, or on an attachment with a address, with all other like empowered.

6.4 CITY-ST-ZIP

Deborah E. Martin