


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 19, 1999 8:00 am
Secretary of State

08-19-1999 90007 001 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000020637					
1. Corporation Name MIAMI INTERNATIONAL FLOWERS, INC.					
Principal Place of Business 5714 W FLAGLER STREET			Mailing Address 5714 W FLAGLER STREET <small>MIAMI FL 33144</small>		



2. Principal Place of Business						2a. Mailing Address						3. Date Incorporated or Qualified 03/04/1998											
21 Suite, Apt. #, etc.						26 Suite, Apt. #, etc.						4. FEI Number 65-0885552											
22 City & State						27 City & State						5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required											
23 Zip						28 Zip						6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees											
24 Country						29 Country						8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
9. Name and Address of Current Registered Agent												10. Name and Address of New Registered Agent											
MALDONADO, DAVID O 432 NW 18TH AVENUE MIAMI FL 33125												81 Name											
												82 Street Address (P.O. Box Number is Not Acceptable)											
												83											
												84 City FL 85 Zip Code											

11. Pursuant to the provisions 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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																							
12. OFFICERS AND DIRECTORS												13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12											
TITLE PSD <input type="checkbox"/> DELETE												1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition											
NAME MALDONADO, DAVID O												1.2 NAME											
STREET ADDRESS 432 NW 18TH AVENUE												1.3 STREET ADDRESS											
CITY-ST-ZIP MIAMI FL 33125												1.4 CITY-ST-ZIP											
TITLE <input type="checkbox"/> DELETE												2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition											
NAME												2.2 NAME											
STREET ADDRESS												2.3 STREET ADDRESS											
CITY-ST-ZIP												2.4 CITY-ST-ZIP											
TITLE <input type="checkbox"/> DELETE												3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition											
NAME												3.2 NAME											
STREET ADDRESS												3.3 STREET ADDRESS											
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NAME												6.2 NAME											
STREET ADDRESS												6.3 STREET ADDRESS											
CITY-ST-ZIP												6.4 CITY-ST-ZIP											

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.

SIGNATURE: *David Maldonado* **JURED** **08/12/99** **(305) 264-0080**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/99)