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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000075363

1. Corporation Name

ALL OCCASION BASKET COMPANY

70 MILITARY TR.B-4 9770 MILITARY TR.B-4
DYNTON BEACH FL 33436 BOYNTON BEACH FL 334

FILED

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90050 027 ***150.00

DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualifed			
					08/26/1998			
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number	<u> </u>	olied For	
21	26				65-0860305		Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & Star	City & State	ate		6. Election Campaign Financing	\$5.00	May Be		
23 28					Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip	Country	,	8. This corporation owes the current year Into	angible	•	
24	25	29 3	30		Personal Property Tax.			
,	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent		
			81	Name			1	
DONAHUE, MARIE E				Street Addr	(D.O. Day Niyahar in Not Assentable)			
5725 FERNLEY DR.,#74				Street Addr	ress (P.O. Box Number is Not Acceptable)	•		
WEST PALM BEACH FL 33415					10 000			
			84	City		85 Zip C	ode	
					FL			
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	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: Re	egistered Age	nt signature require	d when reinstating) DATE			
12. OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	DONAHUE, MARIE E		1.2 NAME				l	
STREET ADDRESS			1.3 STREE	TADDRESS]	
CITY-ST-ZIP	WEST PALM BEACH FL 33415		1.4 CITY-ST-ZIP					
TITLE	WEST TABIT BEAST TE SOUTH	☐ DELETE	2.1 TITLE	··		☐ Change	☐ Addition	
NAME			2.2 NAME				J	
				T ADDRESS				
STREET ADDRESS			1					
CITY-ST-ZIP		DELETE	2. 4 CITY-5 3.1 TITLE	51-ZIP		Change	Addition	
TITLE		C pereie	1			☐ ca9a		
NAME	1		3.2 NAME					
STREET ADDRESS	·			T ADORESS				
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		Change	Addition	
TITLE		☐ DELETE	4.1 TITLE			□ change		
NAME			4. 2 NAME				ţ	
STREET ADDRESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME			5.2 NAME		•			
STREET ADDRESS			5.3 STREE	TADDRESS	•			
CITY-ST-ZIP			5.4 CITY-S	IT-ZIP				
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	TADDRESS			}	
C.TILLET ADDITION								

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, with all other like empowered.