

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90051 042 ***150.00

0495224 AV

DOCUMENT # P99000046587

1. Entity Name
FLOWER SPOT, INC.

Principal Place of Business
1815 TAMiami TRAIL NORTH
NAPLES FL 34102

Mailing Address
1815 TAMiami TRAIL NORTH
NAPLES FL 34102



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1807 TAMiami TRAIL N
 Suite, Apt. #, etc.

3. Mailing Address
1807 TAMiami TRAIL N
 Suite, Apt. #, etc.

City & State
NAPLES FL
 Zip
34102
 Country
COVER

City & State
NAPLES FL
 Zip
34102
 Country
COVER

4. FEI Number
65-0921845

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STEWART, ROBERT B
.815 TAMiami TRAIL NORTH
NAPLES FL 34102

7. Name and Address of New Registered Agent

Name
STEWART, ROBERT B.

Street Address (P.O. Box Number is Not Acceptable)
1807 TAMiami TRAIL N

City
NAPLES FL Zip Code
34102

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Robert B Stewart*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/25/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
D ☐ Delete
 NAME
STEWART, ROBERT B
 STREET ADDRESS
1815 TAMiami TRAIL NORTH
 CITY-ST-ZIP
NAPLES FL 34102

TITLE
D ☐ Delete
 NAME
STEWART, ANALYN
 STREET ADDRESS
1815 TAMiami TRAIL NORTH
 CITY-ST-ZIP
NAPLES FL 34102

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
D ☒ Change ☐ Addition
 NAME
STEWART, ROBERT B
 STREET ADDRESS
1807 TAMiami TRAIL N
 CITY-ST-ZIP
NAPLES FL 34102

TITLE
D ☒ Change ☐ Addition
 NAME
STEWART ANALYN
 STREET ADDRESS
1807 TAMiami TRAIL N
 CITY-ST-ZIP
NAPLES FL 34102

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robert B Stewart*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/02 9414342323

Date

Daytime Phone #

CR2E034 (9/01)