

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000057373

1. Entity Name
FLORAL SALES, INC.

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90335 011 ***150.00

Principal Place of Business
17242 SW 88 AVENUE
MIAMI FL 33157

Mailing Address
17242 SW 88 AVENUE
MIAMI FL 33157

000440



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
PO BOX 148
Suite, Apt. #, etc.

3. Mailing Address
PO BOX 148
Suite, Apt. #, etc.

City & State
EARLETON, FL
Zip
32631
Country
ALACHUA

City & State
EARLETON, FL
Zip
32631
Country
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4. FEI Number 65-0936218
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
KERR, NANCY
17242 SW 88 AVENUE
MIAMI FL 33157

7. Name and Address of New Registered Agent
Name: KERR, Nancy
Street Address (P.O. Box Number is Not Acceptable)
11808 NE 205 TERRACE
City Earleton FL Zip Code 32631

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 *[Signature]* (NOTE: Registered Agent signature required when reinstating)
DATE 1-30-01

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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete D KERR, NANCY 17242 SW 88 AVENUE MIAMI FL 33157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete D KERR, TOM 17242 SW 88 AVENUE MIAMI FL 33157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Kerr, Nancy 11808 NE 205 Terr EARLETON, FL 32631
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Kerr, Tom 11808 NE 205 Terr Earleton, FL 32631
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *[Signature]* NANCY C. KERR 1-30-01 352-468-3865
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)