## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000107067

Entity Name: SPLENDID FLOWERS INC.

**FILED** Apr 16, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1150 NW 72 AVE, SUITE 305 7270 NW 12TH STREET MIAMI, FL 33126

730

MIAMI, FL 33126

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 522113 MIAMI, FL 331522113

FEI Number: 65-0966648 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PARDO, EDWARD PARDO, EDWARD 1150 NW 72 AVE, SUITE 305 7270 NW 12TH STREET MIAMI, FL 33126 730 MIAMI, FL 33126 US

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: EDWARD PARDO 04/16/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete Title: (X) Change ( ) Addition

PARDO, EDWARD Name: Name: PARDO, EDWARD

1150 NW 72 AVE, SUITE 305 7270 NW 12TH STREET, SUITE 730 Address: Address:

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

Title: Title: ( ) Delete (X) Change ( ) Addition PARDO, PETER PARDO, PETER Name:

Name: 1150 NW 72 AVE, SUITE 305 7270 NW 12TH STREET, SUITE 730 Address: Address:

MIAMI, FL 33126 MIAMI, FL 33126 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: SD ( ) Delete SD PARDO, VILMA PARDO, VILMA Name: Name:

1150 NW 72 AVE, SUITE 305 7270 NW 12TH STREET, SUITE 730 Address: Address:

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

Title: ( ) Delete Title: (X) Change ( ) Addition

PARDO, KENNETH PARDO, KENNETH Name: Name:

Address: 1150 NW 72 AVE. SUITE 305 Address: 7270 NW 12TH STREET, SUITE 730

City-St-Zip: City-St-Zip: MIAMI, FL 33126 MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD PARDO **PRES** 04/16/2009