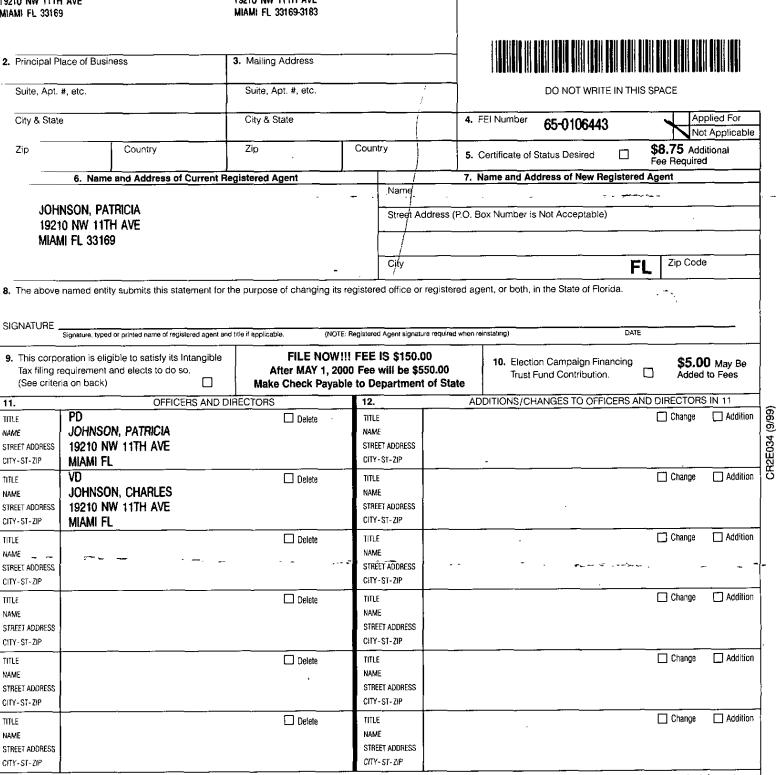
2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **S47670**

1. Entity Name PERFECT DESIGN FLORIST, INC. Mailing Address Principal Place of Business 19210 NW 11TH AVE 19210 NW 11TH AVE MIAMI FL 33169-3183 MIAMI FL 33169 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

FILED May 08, 2000 8:00 am Secretary of State

05-08-2000 90207 039 ***150.00



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 the empowered.

SIGNATURE:

11.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR