

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55116

FILED  
Apr 23, 2005  
Secretary of State

Entity Name: FLOWER EXPRESS UNLIMITED, INC.

**Current Principal Place of Business:**

2504 N. MAIN  
JACKSONVILLE, FL 322063757 US

**New Principal Place of Business:**

**Current Mailing Address:**

2504 N. MAIN  
JACKSONVILLE, FL 322063757 US

**New Mailing Address:**

FEI Number: 59-3070019

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHAMBERS, LINDA  
2504 N MAIN ST  
JACKSONVILLE, FL 32206 US

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

CHAMBERS, LINDA  
2504 N MAIN ST  
JACKSONVILLE, FL 32206 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: LINDA CHAMBERS

04/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: CHAMBERS, LINDA  
Address: 2504 N MAIN ST  
City-St-Zip: JACKSONVILLE, FL

Title: V ( ) Delete  
Name: CHAMBERS, JAY  
Address: 2504 N MAIN ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: V ( ) Delete  
Name: DAVIS, TRAVIS  
Address: 2504 N MAIN ST  
City-St-Zip: JACKSONVILLE, FL 32206

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LINDA CHAMBERS

PRES

04/23/2005

Electronic Signature of Signing Officer or Director

Date