

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90160 006 ***150.00

DOCUMENT # S99485

1. Entity Name
THE FLOWER CENTRE OF ST. PETERSBURG, INC.

Principal Place of Business 1343 SNELL ISLE BLVD N.E. SNELL ISLE PLAZA ST. PETERSBURG FL 33704	Mailing Address 1343 SNELL ISLE BLVD N.E. SNELL ISLE PLAZA ST. PETERSBURG FL 33704
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3099193		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SLICK, JOSEPH L 1343 SNELL ISLE BLVD N.E. SNELL ISLE PLAZA ST PETERSBURG FL 33704		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIMONEAU, WILFRED J 8410 17TH WAY NORTH ST PETERSBURG FL 33702-2857 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST SLICK, JOSEPH L 8410 17TH WAY NORTH ST PETERSBURG FL 33702-2857 <input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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: *SIMONEAU WILFRED J* **President** *9/12/02* **727-823-3432**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attahmedt # 399485 678134

The Flower Centre of St Petersburg Inc.
1343 Snell Isle Blvd NE
St Petersburg Florida 33704
727 823 3432

Thursday, September 12, 2002

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee FL 32302

Dear Sir or Madam,

Concerning the enclosed Uniform Business Report, I just called and spoke to Laura and explained that we did not receive the report normally due on May 1st. I have checked everywhere and cannot find it, so when this report came I was quite disturbed that we didn't have a chance to pay the regular fee. As you can see, we have never been late before and I do hope you will understand that we really didn't receive the original request for renewal and accept our check in the amount of \$150.00

Thank you for your consideration.


Joe Slick
The Flower Centre of St Petersburg