FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V00117** **(4)**

1. Corporation Name
PERRY'S FLORIST NORTH, INC.

Principal Place of Business
18331 NW 7TH AVE
MAIMI FL 33169
US

Mailing Address
18331 NW 7TH AVE.
MIAMI FL 33169

2. Principal Place of Business
21
Street Apt. # etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Street Apt. # etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 12/13/1991
3a. Date of Last Report: 04/20/1995
4. FEI Number: 65-0322629 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. **Name and Address of Current Registered Agent**

PERRY, WILLIE JR
18331 NW 7TH AVENUE
MIAMI FL

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE DATE

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City St Zip	
DP	PERRY, WILLIE, JR.	18331 NW 7TH AVE.	MIAMI FL	☐ DELETE
ST	PERRY, WILLIE, JR.	18331 NW 7TH AVE.	MIAMI FL	☐ DELETE
DV	PERRY, BRENDA	18331 NW 7TH AVE.	MIAMI FL	☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is true and correct, and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date 2-12-96 — Daytime Phone # 305 457-3343

CR2E034 (12/95)