

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V00866

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: EXPRESS FLORAL INC.

**Current Principal Place of Business:**

2720 NORTHWEST 72ND AVENUE  
MIAMI, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

2720 NORTHWEST 72ND AVENUE  
MIAMI, FL 33122

**New Mailing Address:**

FEI Number: 65-0306342

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCMASTER, DAVID  
2720 NORTHWEST 72ND AVENUE  
MIAMI, FL 33122 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: DAVID D MCMASTER III,  
Address: 10700 SW 60TH AVE  
City-St-Zip: MIAMI, FL 33156

Title: VPS ( ) Delete  
Name: ELIZABETH ANN MCMAST, ER  
Address: 10700 SW 60TH AVE  
City-St-Zip: MIAMI, FL 33156

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

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 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: DAVID MCMASTER

PT

01/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date