

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000025617

**FILED
Apr 30, 2014
Secretary of State
CC6573136239**

Entity Name: LOUISA'S FLORIST AND CATERING SERVICES, INC.

Current Principal Place of Business:

1699 NE 163RD STREET
NORTH MIAMI BCH, FL 33162

Current Mailing Address:

1699 NE 163RD STREET
NORTH MIAMI BCH, FL 33162 US

FEI Number: 27-2192940

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PONTHIEUX, LOUISA
1699 NE 163RD STREET
NORTH MIAMI BEACH, FL 33162 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name PONTHIEUX, LOUISA
Address 1699 NE 163RD STREET
City-State-Zip: NORTH MIAMI BCH FL 33162

Title VP
Name ST PHAR, LAURIE
Address 1699 NE 163 ST
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title S
Name ST PHAR, PASCAL
Address 1699 NE 163RD STREET
City-State-Zip: NORTH MIAMI BCH FL 33162

I hereby 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 all other like empowered.

SIGNATURE: LOUISA PONTHIEUX

PRESIDENT

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date