

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F98000000920

Entity Name: 800 FLOWERS, INC.

FILED
Oct 12, 2006
Secretary of State

Current Principal Place of Business:

1600 STEWART AVE.
WESTBURY, NY 11590

New Principal Place of Business:

ONE OLD COUNTRY ROAD
SUITE 500
CARLE PLACE, NY 11514

Current Mailing Address:

1600 STEWART AVE.
WESTBURY, NY 11590

New Mailing Address:

ONE OLD COUNTRY ROAD
SUITE 500
CARLE PLACE, NY 11514

FEI Number: 11-3329949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PETER SOUZA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: MCCANN, JAMES
Address: 15 WEST DR.
City-St-Zip: PLANDOME, NY 11030

Title: S () Delete
Name: MCCANN, CHRISTOPHER
Address: 16 PRIVATE RD
City-St-Zip: BAYVILLE, NY 11707

Title: T () Delete
Name: SHEA, WILLIAM
Address: 9 LISA CT.
City-St-Zip: MESCONSET, NY 11787

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 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: WILLIAM SHEA

Electronic Signature of Signing Officer or Director

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10/12/2006

Date