

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037420

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Entity Name:** FABULOUS FLOWERS, INC.

**Current Principal Place of Business:**

2780 N. FLORIDA AVENUE,  
SUITE 3  
HERNANDO, FL 34442

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1401  
HERNANDO, FL 34442

**New Mailing Address:**

**FEI Number:** 14-1879188

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCLAUGHLIN, MARGARET L  
9090 S. WATERVIEW DRIVE  
FLORAL CITY,, FL 34436 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

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: MCLAUGHLIN, MARGARET  
Address: 9090 S. WATERVIEW DR.  
City-St-Zip: FLORAL CITY, FL 34436

Title: VP  
Name: CUTLER, STEFANIE  
Address: 9051 E. SILVER OAKS TRAIL  
City-St-Zip: INVERNESS, FL 34450

Title: S  
Name: CUTLER, STEFANIE  
Address: 9051 E. SILVER OAKS TRAIL  
City-St-Zip: INVERNESS, FL 34450

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: MARGARET MCLAUGHLIN

PRES

02/28/2012

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

\_\_\_\_\_ Date