

2014 FLORIDA NON PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005837

Entity Name: FOREVER BLOOM ALLIANCE, INC.

Current Principal Place of Business:

6927 S.W. 115 PLACE
UNIT: A-38
MIAMI, FL 33173

FILED
Apr 28, 2014
Secretary of State
CC4089056768

Current Mailing Address:

6927 S.W. 115 PLACE
UNIT: A-38
MIAMI, FL 33173 US

FEI Number: 14-2005387

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REID, ANTHONY F
6927 S.W. 115 PLACE
UNIT: A-38
MIAMI, FL 33173 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 PRESIDENT
Name GUERRA, STEPHANIE M
Address P.O. BOX 522474
City-State-Zip: MIAMI FL 33152

Title VP
Name RUIZ, JENNY
Address 3601 SW 16TH STREET
City-State-Zip: MIAMI FL 33145

Title SECRETARY
Name CHOW, YANIRE
Address 2602 SW 2 STREET
City-State-Zip: MIAMI FL 33135

Title TREASURER
Name RODRIGUEZ, CLARA
Address P.O. BOX 522474
City-State-Zip: MIAMI FL 33152

Title CREATIVE DIRECTOR
Name MCLEOD, JEREMIE
Address 21 S.E. 7TH ROAD
City-State-Zip: MIAMI FL 33030

Title DIRECTOR
Name REID, ANTHONY F
Address 6927 S.W. 115 PLACE, UNIT: A-38
City-State-Zip: MIAMI FL 33173

Title COMMUNITY RELATIONS
Name MENDOZA, ABNER
Address 3601 SW 16TH STREET
City-State-Zip: MIAMI FL 33145

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY REID

DIRECTOR

04/28/2014

Electronic Signature of Signing Officer/Director Detail

Date