

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111930

Entity Name: ORGANIC BEAUTY, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

1054 KAPP DRIVE
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

1054 KAPP DRIVE
CLEARWATER, FL 33765

New Mailing Address:

3665 E. BAY DRIVE
204-180
LARGO, FL 33771

FEI Number: 59-3758117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINLEY, MYRON G ESQ.
FINLEY, FLETCHER, KNAPMEYER, LLP
413 CLEVELAND STREET
CLEARWATER, FL 33755 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: PTD () Delete
Name: JOHNSON, EVAN
Address: 310 EDGEWOOD AVE.
City-St-Zip: CLEARWATER, FL 33755

Title: VDS () Delete
Name: JOHNSON, KEVIN
Address: 310 EDGEWOOD AVE.
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: GROSS, GENE
Address: 227 WINDWARD PASSAGE
City-St-Zip: CLEARWATER, FL 337672237

Title: D () Delete
Name: GROSS, MARYANN
Address: 227 WINDWARD PASSAGE
City-St-Zip: CLEARWATER, FL 337672237

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:

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 Section 119.07(3)(i), 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: EVAN JOHNSON

PTD

04/26/2005

Electronic Signature of Signing Officer or Director

_____ Date