2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L78953

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

1002 JUPITER PARK LANE, SUITE 1

1002 JUPITER PARK LANE, SUITE 1

OFFICERS AND DIRECTORS

1. Entity Name

City & State

HACKNEY, BOB

(See criteria on back)

4400 PGA BLVD SUITE 505 PALM BEACH GARDENS FL 33410

9. This corporation is eligible to satisfy its Intangible

EASTERLING, JOHN

JUPITER FL 33458

PERRY, MICHAEL

JUPITER FL 33458

Tax filing requirement and elects to do so.

Zip

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

AMAZON HERB COMPANY Principal Place of Business Mailing Address 1002 JUPITER PARK LANE 1002 JUPITER PARK LANE SUITE 1 SUITE 1 JUPITER FL 33458-8965 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State

Zip

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

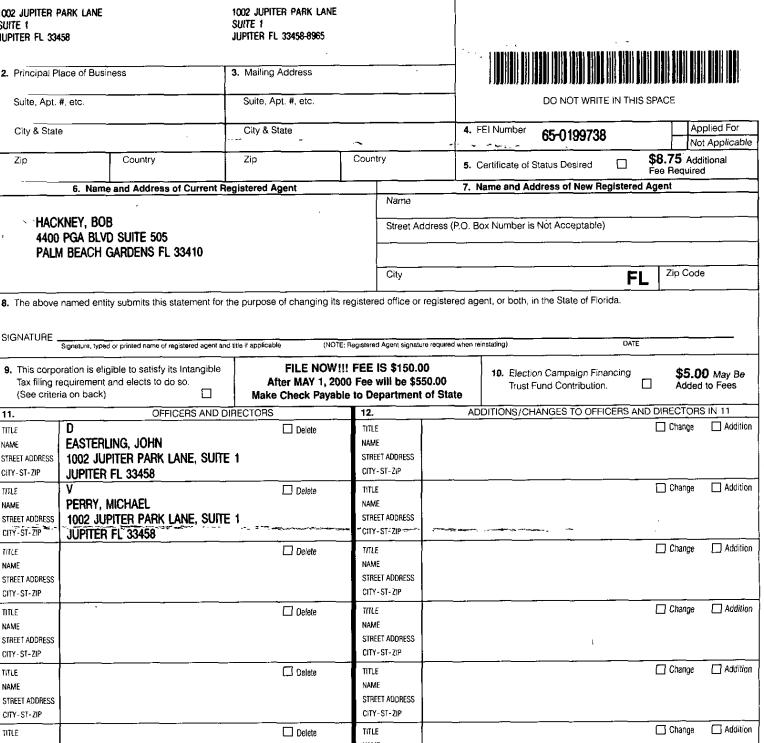
TITLE

Name

City

FILED Apr 23, 2000 8:00 am Secretary of State

04-23-2000 90065 018 ***150.00



CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing does not qualify 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed; or on an attachment with an address, with all other like empowered.

changed, or on an attach SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR