

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005333

FILED
May 21, 2007
Secretary of State

Entity Name: NATURAL ELEMENT INTERIOR DECORATING & DESIGN, INC.

Current Principal Place of Business:

121 HIGHWAY 386
MEXICO BEACH, FL 32456

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 14207
MEXICO BEACH, FL 32410

New Mailing Address:

FEI Number: 76-0720660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIGMAN, KIM
121 HIGHWAY 386
MEXICO BEACH, FL 32456 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

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: CPS () Delete
Name: SIGMAN, KIM
Address: POST OFFICE BOX 14207
City-St-Zip: MEXICO BEACH, FL 32410

Title: V () Delete
Name: SIGMAN, ARTHUR
Address: POST OFFICE BOX 14207
City-St-Zip: MEXICO BEACH, FL 32410

Title: T () Delete
Name: SIGMAN, ART
Address: POST OFFICE BOX 14207
City-St-Zip: MEXICO BEACH, FL 32410

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 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: KIM SIGMAN

CPS

05/21/2007

Electronic Signature of Signing Officer or Director

Date