

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000000614 (6)

1. Corporation Name
GARDEN BOTANIK, INC.

Principal Place of Business

8624 154 AVE NE
REDMOND WA 98052
US

Mailing Address

8624 154 AVE
REDMOND WA 98052
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/06/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 91-1464962	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUCE, MICHAEL W	12 NAME	
STREET ADDRESS	8624 154TH AVENUE N.E.	13 STREET ADDRESS	
CITY - ST - ZIP	REDMOND WA 98052	14 CITY - ST - ZIP	
TITLE	V	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JENSEN, ARLEE	22 NAME	
STREET ADDRESS	8624 154TH AVENUE N.E.	23 STREET ADDRESS	
CITY - ST - ZIP	REDMOND WA 98052	24 CITY - ST - ZIP	
TITLE	SD	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROTHMAN, JEFFREY H	32 NAME	
STREET ADDRESS	10809 120TH AVENUE N.E.	33 STREET ADDRESS	
CITY - ST - ZIP	KIRKLAND WA 98033	34 CITY - ST - ZIP	
TITLE	D	41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EDERER, DAVID A	42 NAME	
STREET ADDRESS	4919 N.E. LAURELCREST LANE, #60	43 STREET ADDRESS	
CITY - ST - ZIP	SEATTLE WA 98105	44 CITY - ST - ZIP	
TITLE	V	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISHER, MICHAEL	52 NAME	
STREET ADDRESS	8624 154TH AVE NE	53 STREET ADDRESS	
CITY - ST - ZIP	REDMOND WA 98052	54 CITY - ST - ZIP	
TITLE	D	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALLAGHER, GERALD R	62 NAME	
STREET ADDRESS	4550 NORWEST CENTER, 90 S. 7TH STREET	63 STREET ADDRESS	
CITY - ST - ZIP	MINNEAPOLIS MN 55402	64 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

George Newman

March 12, 1998 (425)881-9603

CP2E034 (10/97)