2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# L63900

Entity Name: ESSENTIAL PRODUCTS OF AMERICA, INC.

Current Principal Place of Business:

3734 131ST AVENUE NORTH
SUITE 2
CLEARWATER, FL 33762

New Principal Place of Business:

2449-1/2 16TH STREET NORTH
SAINT PETERSBURG, FL 33704

Current Mailing Address:

3734 131ST AVENUE NORTH
SUITE 2
CLEARWATER, FL 33762

New Mailing Address:

2449-1/2 16TH STREET NORTH
SAINT PETERSBURG, FL 33704

FEI Number: 65-0198748 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MICHAEL H. ALEXANDER
16213 DEW DROP LANE
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

MICHAEL H. ALEXANDER
2449 16TH STREET NORTH
SAINT PETERSBURG, FL 33704 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: MICHAEL ALEXANDER 04/26/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ALEXANDER, MICHAEL H, .
Address: 16213 DEW DROP
City-St-Zip: TAMPA, FL 33625

Title: DT ( ) Delete
Name: OLGA VOZNYUK,
Address: 16213 DEW DROP LANE
City-St-Zip: TAMPA, FL 33625

Title: VP ( ) Delete
Name: ALEXANDER, LILIA,
Address: 16213 DEW DROP LANE
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ALEXANDER, MICHAEL H, .
Address: 2449 16TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: DT (X) Change ( ) Addition
Name: OLGA VOZNYUK,
Address: 2449 16TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VP (X) Change ( ) Addition
Name: ALEXANDER, LILIA,
Address: 2449 16TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

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: MICHAEL ALEXANDER DP 04/26/2007
Electronic Signature of Signing Officer or Director Date