

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L63900

Entity Name: ESSENTIAL PRODUCTS OF AMERICA, INC.

FILED
Oct 03, 2007
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 65-0198748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, MICHAEL H
2449 16TH STREET NORTH
SAINT PETERSBURG, FL 33704 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VOZNYUK, OLGA
Address: 2449-1/2 16TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VP (X) Delete
Name: ALEXANDER, LILIA
Address: 2449-1/2 16TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALEXANDER, MICHAEL
Address: 2449-1/2 16TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

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: MICHAEL ALEXANDER

PRES

10/03/2007

Electronic Signature of Signing Officer or Director

Date