

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011290

FILED
Apr 30, 2009
Secretary of State

Entity Name: MARY'S EDEN CORPORATION

Current Principal Place of Business:

5114 SW 133 CT. DRIVE
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

PO BOX 654858
MIAMI, FL 33265

New Mailing Address:

FEI Number: 59-3828324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, RICHARD ESQ.
1500 NW 107 AVE #200
MIAMI, FL 33172 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: PD () Delete
Name: DIAZ LEON, MARCELA
Address: 5114 SW 133 CT. DRIVE
City-St-Zip: MIAMI, FL 33175

Title: VPD () Delete
Name: FROMETA, CARMEN R
Address: 5114 SW 133 CT. DRIVE
City-St-Zip: MIAMI, FL 33175

Title: TD () Delete
Name: SEQUEIRA, RUTH
Address: 5114 SW 133 CT. DRIVE
City-St-Zip: MIAMI, FL 33175

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCELA DIAZ

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date