2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 25, 2007 8:00 am Secretary of State

DOCUMENT # N0600001911 1. Entity Name PASSION FOR PURITY, INC.							~	01-25-200	_		51.25
Principal Place of Business 4938 BISCAYNE DR LAXE WORTH, FL 33463			Mailing Address 4938 BISCAYNE DR LAKE WORTH, FL 33463								
		ness - No P.O. Box#	3. Mailing Address		- T						
4938 Biscayne Dr.			Suite, Apt. #, etc.			1	01162007	Chg-NP	CR2E0	37 (12/06)	
City & State	e .		City & State		. F	1	4. FEI Number			Ac	oplied For
3346 Zip	3	Palm Beach	33463 Zip		IM Be untry	ach		20-44		\$8.75 Add	
							Certificate of Status Desired Fee Required Name and Address of New Registered Agent				
6. Name and Address of Current Registered Agent							7. Name and A	aaress of New	Registered	Agent	•
MOORE, ALMA N 4938 BISCAYNE DR					Street A	ddress (F	P.O. Box Number	is Not Accepta	ble)		,
LAKE WO	RIH, FL 3	33463							•	•	
					City				F١	Zip Cod	e
8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept											
the obligations of registered agent.											
SIGNATURE Signature, typed of printed name of registered agent and little of applicable. (NOTE: Registered Agent signature required when remistating) DATE											
	Signature, typed	A burked listing of lediting and after a	по пле и архисакие. (190	I C. Hegistere	o Agent eigned	ure required	wien remissaning)		DATE		ſ
	•	<u>'</u>									
	_	e is \$61.25 tay 1, 2007	9. Election Ca Trust Fund				\$5.00 May Be Added to Fees	FI		k payable to	
10.	Due by N		Trust Fund	Contribut	tion,	A			orlda Depa	rtment of SI	tate
TITLE	Due by N	OFFICERS AND DIR	Trust Fund	Contribut 11.	tion.	L.) A	Added to Fees	VGES TO OFFIC	orlda Depa	rtment of SI	tate
	Due by N	OFFICERS AND DIR	Trust Fund	11.	tion.	D Kick	Added to Fees DDITIONS/CHAN	Ida L.	ORDAN DEPARTMENT OF THE PROPERTY OF THE PROPER	rtment of SI	tate
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indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE White OF PRINTED BANG OFFICER OR DIRECTOR DELLECTOR Date Department of Depar