8/14

FILED
Aug 29, 2002 8:00 am
Secretary of State

08-14-2002 90024 036 ***150.00

[redacted]

DO NOT WRITE IN THIS SPACE

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000103273

1. Entity Name
BOTANICAL ESSENCE CORP. ✓

Principal Place of Business	Mailing Address
7836 COLONY LAKE DRIVE BOYNTON BEACH FL 33436	7836 COLONY LAKE DRIVE BOYNTON BEACH FL 33436

2. Principal Place of Business		3. Mailing Address	
6474 Lake Worth Rd		7836 Colony Lake Dr.	
Suite, Apt. #, etc.		Suite, Apt. #, etc. E	
City & State: Lake Worth, FL		City & State: Boynton Beach FL	
Zip: 33463	Country: USA	Zip: 33436	Country: USA

4. FEI Number 65-1148878 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] Diomaris Torres 8/12/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After September 13, 2002 Fee will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD TORRES, DIOMARIS 7836 COLONY LAKE DRIVE BOYNTON BEACH FL 33436	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TORRES, JUAN F 7836 COLONY LAKE DRIVE BOYNTON BEACH FL 33436	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (4/02)

13. 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED [signature] Torres 8/12/02 561-632-3136
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

Botanical Essence Corp. Aug. 12-2002

98652

~~P01000103273~~

Diomaris Torres
7836 Colony Lake Dr.
Boynton Beach, FL 33436
(561) 632-3436

Division of Corporations
Uniform Business Report filings

To whom It may Concern:

Enclosed Please find a check for the Amount of $150.00 for renewal.

I have not received a notice prior to this one. I was unaware of this renewal. Please waive the penalty fee.

I spoke to a representative of your division today and explained this situation. I was asked to send the $150.00 Dollars renewal fee ASAP.

Thank you in advanced for your assistance.

Diomaris

Botanical Essence Corp.