2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111930

FILED Apr 26, 2006 Secretary of State

Entity Nar	me: ORGAN	IC BEAUTY, INC.				
Current P	rincipal Plac	e of Business:	New Principal Plac	New Principal Place of Business:		
1054 KAPF CLEARWA	PDRIVE ATER, FL 337	765				
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:		
3665 E. BA # 204-180 LARGO, F			1054 KAPP DRIVE CLEARWATER, FL	1054 KAPP DRIVE CLEARWATER, FL 33765		
FEI Number:	: 59-3758117	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:		
413 CLEVE	IYRON G LETCHER, KI ELAND STRE ATER, FL 337		1221 ROGERS STR	FINLEY, MYRON G FINLEY, FLETCHER & PILCH, LLP 1221 ROGERS STREET, SUITE B CLEARWATER, FL 33756 US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,		
SIGNATUR	RE:			04/26/2006		
	Electro	nic Signature of Registered Age	ent	Date		
Election Car	npaign Financir	ng Trust Fund Contribution ().				
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PTD (JOHNSON, EV 310 EDGEWO CLEARWATEI	OOD AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VDS (JOHNSON, KE 310 EDGEWO CLEARWATEI	OOD AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	GROSS, GEN 227 WINDWA		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	D (X GROSS, MAR	K) DeleteYANN	Title: Name:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

	SIGNATURE:	EVAN JOHNSON	PTD	04/26/2006
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227 WINDWARD PASSAGE

CLEARWATER, FL 337672237

Address:

City-St-Zip: