

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000039790

FILED
Sep 14, 2004
Secretary of State

Entity Name: ESSENTIAL EVOLUTION CORP.

Current Principal Place of Business:

292, SOUTH COUNTY ROAD
109
PALM BEACH, FL 33480 US

Current Mailing Address:

292, SOUTH COUNTY ROAD
109
PALM BEACH, FL 33480 US

New Principal Place of Business:

350, SOUTH COUNTY ROAD
102
PALM BEACH, FL 33480 US

New Mailing Address:

350, SOUTH COUNTY ROAD
102
PALM BEACH, FL 33480 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMPADARUTH, AMAL MR
292, SOUTH COUNTY ROAD
109
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

RAMPADARUTH, AMAL MR
350, SOUTH COUNTY ROAD
102
PALM BEACH, FL 33480 US

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: AMAL RAMPADARUTH 09/14/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DE LENCLOS, ALAIN MR
Address: 5, RUE EMILE FAVRE
City-St-Zip: CLUSES, FRANCE, FR 74300 FR

Title: SEC () Delete
Name: DE LENCLOS, MARTINE MRS
Address: 5, RUE EMILE FAVRE
City-St-Zip: CLUSES, FRANCE, FR 74300 FR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: ALAIN DE LENCLOS P 09/14/2004
Electronic Signature of Signing Officer or Director Date