2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000079490

Entity Name: AT NATURALLY INC.

FILED Feb 05, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6605 NW 74THH AVE 67 CALCUTTA COURT INDIALANTIC, FL 32903 MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

6605 NW 74THH AVE 67 CALCUTTA COURT MIAMI, FL 33166 INDIALANTIC, FL 32903

FEI Number: 51-0475829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NABORS, BARBARA MEDINA, RAUL 6605 NW 74THH AVE 67 CALCÚTTA COURT MIAMI, FL 33166 INDIALANTIC, FL 32903

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: BARBARA NABORS 02/05/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name: Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition NABORS, ANTHONY T NABORS, ANTHONY T Name: Name:

6605 NW 74THH AVE 6605 NW 74THH AVE Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166

Title: DV Title: () Delete (X) Change () Addition Name: NABORS, BARBARA I Name: NABORS, BARBARA I

6605 NW 74THH AVE Address: 6605 NW 74THH AVE Address: MIAMI, FL 33166 MIAMI, FL 33166 City-St-Zip: City-St-Zip:

Title: Title: DT (X) Delete () Change () Addition

MAYMON, CHARLES Name: Name: 6605 NW 74THH AVE Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip:

Title: DS (X) Delete Title: () Change () Addition

MEDINA, RAUL Name: 6605 NW 74THH AVE Address: City-St-Zip: MIAMI, FL 33166 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: BARBARA NABORS D 02/05/2004