2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082730

Entity Name: MAJESTIC AROMAS, INC.

Apr 21, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1751 S CLYDE MORRIS BLVD STE 111 1290 9TH STREET DAYTONA BEACH, FL 32119

SUITE 603

DAYTONA BEACH, FL 32117

Current Mailing Address: New Mailing Address:

1751 S CLYDE MORRIS BLVD STE 111 P.O BOX 15095

DAYTONA BEACH, FL 32119 DAYTONA BEACH, FL 32114

FEI Number: 11-3699067 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MUHAMMAD, ALI B MUHAMMAD, ALI B Name: Name: 1751 S CLYDE MORRIS BLVD STE 111 P.O BOX 15095 Address: Address:

City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32114

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

MUHAMMAD, ALI B Name: SMITH, CHARLES Name: 1751 S CLYDE MORRIS BLVD STE 111 P.O BOX 15095 Address: Address:

DAYTONA BEACH, FL 32119 DAYTONA BEACH, FL 32114 City-St-Zip: City-St-Zip:

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

LAROCHE, LENUEL MUHAMMAD, ALI B Name: Name: 1751 S CLYDE MORRIS BLVD STE 111 P O BOX 15095 Address: Address:

City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32114

Title: () Delete Title: **TRES** (X) Change () Addition

MUHAMMAD, SULAYMAN MUHAMMAD, ALI B Name: Name: Address: 1751 S CLYDE MORRIS BLVD STE 111 Address: P.O BOX 15095

City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32114

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: ALI BURKE MUHAMMAD MR 04/21/2004