

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102023

FILED
May 23, 2007
Secretary of State

Entity Name: PRECIOUS AROMATHERAPY INC.

Current Principal Place of Business:

375 200 LINE ROAD
NEAH BAY, WA 98357

New Principal Place of Business:

53 WAATCH BEACH DRIVE
NEAH BAY, WA 98357

Current Mailing Address:

PO BOX 155
NEAH BAY, WA 98357

New Mailing Address:

FEI Number: 11-3703607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, PAULA MARIE
4554 SUNRAY PLACE
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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

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: PRES () Delete
Name: MARTIN, PAULA MARIE
Address: 375 200 LINE ROAD
City-St-Zip: NEAH BAY, WA 98357

Title: VP () Delete
Name: MARTIN, VICTORIA
Address: 6733 MORNING RIDE CIRCLE
City-St-Zip: ALEXANDRIA, VA 22315

Title: SECR () Delete
Name: LYNN, SHARON
Address: 604 INDIAN LOOKOUT ROAD
City-St-Zip: LYONS, CO 80540

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MARTIN, PAULA MARIE PRES
Address: 53 WAATCH BEACH DRIVE
City-St-Zip: NEAH BAY, WA 98357

Title: VP (X) Change () Addition
Name: JOHNSON, NATHANIEL R VP
Address: PO BOX 40
City-St-Zip: REDVALE, CO 81431

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: PAULA MARIE MARTIN

PRES

05/23/2007

Electronic Signature of Signing Officer or Director

Date