

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111838

FILED
Apr 26, 2005
Secretary of State

Entity Name: BIONATURAL SOLUTIONS, CORP.

Current Principal Place of Business:

1835 E. HALLANDALE BEACH BLVD., #135
HALLANDALE, FL 33009

New Principal Place of Business:

1314 E. LAS OLAS BLVD
336
FT. LAUDERDALE, FL 33301

Current Mailing Address:

1835 E. HALLANDALE BEACH BLVD., #135
HALLANDALE, FL 33009

New Mailing Address:

1314 E. LAS OLAS BLVD
336
FT. LAUDERDALE, FL 33301

FEI Number: 51-0516649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, PATRICIA M
1835 E. HALLANDALE BEACH BLVD., #135
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

FERNANDEZ, PATRICIA M
1314 E. LAS OLAS BLVD
336
FT. LAUDERDALE, FL 33301 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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FERNANDEZ, PATRICIA M
Address: 1835 E. HALLANDALE BEACH BLVD., #135
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FERNANDEZ, PATRICIA M
Address: 1314 E. LAS OLAS BLVD, # 336
City-St-Zip: FT. LAUDERDALE, FL 33301

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: PATRICIA M. FERNANDEZ

PD

04/26/2005

Electronic Signature of Signing Officer or Director

Date