



2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000071180 1. Entity Name NATURAMEDIS, INC	
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Principal Place of Business 6682 NW 107TH CT MIAMI, FL 33178 US	Mailing Address 6682 NW 107TH CT MIAMI, FL 33178 US
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DO NOT WRITE IN THIS SPACE

FILED
06 MAY 15 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02212006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1068778	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

RAY PEREZ & ASSOCIATES PA
13935 NW 1ST AVE
MIAMI, FL 33168

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	100075092911 05/23/06--01030--001 **700.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PEREZ, JIMMY 6682 NW 107TH CT MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILLES, SANDRA 6682 NW 107TH CT MIAMI, FL 33178
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BS/22/04

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Perez Jimmy/Pres 2/23/06 305 769 1911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #