2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000040417

Name:

Address:

City-St-Zip:

FILED Apr 20, 2006 Secretary of State

Entity Name: ORGANIC SOLUTIONS, INC. **Current Principal Place of Business: New Principal Place of Business:** 411 CLEVELAND STREET 425 CLEVELAND STREET CLEARWATER, FL 33755 #188 CLEARWATER, FL 33755 **New Mailing Address: Current Mailing Address:** 411 CLEVELAND STREET #188 CLEARWATER, FL 33755 FEI Number: 20-2510999 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: FINLEY, FLETCHER & PILCH, LLP 1221 RÓGERS STREET SUITE B CLEARWATER, FL 33756 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 SHILLINGTON, IAN SHILLINGTON, IAN Name: Name: 2016 REBECCA DRIVE 411 CLEVELAND STREET, # - 188 Address: Address: CLEARWATER, FL 33755 City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title:

 Title:
 SD () Delete
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 Name:
 SHILLINGTON, VALERIE
 Name:
 SHILLINGTON, VALORIE

 Address:
 2016 REBECCA DRIVE
 Address:
 411 CLEVELAND STREET, # - 188

 City-St-Zip:
 CLEARWATER, FL 33755
 CLEARWATER, FL 33755

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 (X) Delete
 Title:

 SIMS, ZEB
 Name:

 411 CLEVELAND STREET, #286
 Address:

 CLEARWATER, FL 33755
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: IAN SHILLINGTON PD 04/20/2006