


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 26, 2007 8:00 am**  
**Secretary of State**

07-26-2007 90030 026 \*\*\*150.00

<b>DOCUMENT # P06000092022</b> 1. Entity Name <b>NATURAL EARTH COSMETIC COMPANY</b>					
Principal Place of Business <b>10133 DELPOINT LANE JACKSONVILLE, FL 32246 US</b>			Mailing Address <b>10133 DELPOINT LANE JACKSONVILLE, FL 32246 US</b>		
<i>As of 9/14/07:</i>					
2. Principal Place of Business - No P.O. Box # <b>11764 Marco Beach Dr.</b>		3. Mailing Address			
Suite, Apt. #, etc. <b>Suite 1</b>		Suite, Apt. #, etc.			
City & State <b>Jacksonville, FL</b>		City & State		4. FEI Number <b>20-5193288</b>	
Zip <b>32224</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>OSSMANN, SANDRA 10133 DELPOINT LANE JACKSONVILLE, FL 32246</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 <u><i>Sandra</i></u> <span style="float: right;">7/24/07</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST OSSMANN, SANDRA 10133 DELPOINT LANE JACKSONVILLE, FL 32246 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSSMANN, SANDRA 10133 DELPOINT LANE JACKSONVILLE, FL 32246 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u><i>Sandra</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			7/24/07 (904) 645-7772 <small>Date Daytime Phone #</small>		

ATTACHMENT 40127192

#P06000092022

FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS  
P.O. Box 8700  
Tallahassee, FL 32314

July 24, 2007

Dear Division of Corporations:

I am writing to inform you that Natural Earth Cosmetic Company recently received a "NOTICE OF INTENT TO DISSOLVE". We never received a reminder or notice for filing an annual report. Please waive our late fee and accept our payment of one hundred and fifty dollars (\$150.00) as payment in full.

Please make note of Principal Place of Business will change as of 9/14/07 to:  
11764 Marco Beach Drive, Ste. 1, Jacksonville, FL 32224

Thank you,



Sandra Ossmann  
President and Registered Agent  
Natural Earth Cosmetic Company  
10133 Delpoint Lane  
Jacksonville, FL 32246  
(904) 645-7772  
Fax: (904) 212-1093