

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104287

Entity Name: BEYOND ESSENTIAL, INC.

FILED
Aug 04, 2008
Secretary of State

Current Principal Place of Business:

11232 PARK BLVD.
SEMINOLE, FL 33772

New Principal Place of Business:

900 EDENVILLE AVE.
CLEARWATER, FL 33764

Current Mailing Address:

11232 PARK BLVD.
SEMINOLE, FL 33772

New Mailing Address:

900 EDENVILLE AVE.
CLEARWATER, FL 33764

FEI Number: 20-5362951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: D () Delete
Name: BATSON, KATHLEEN
Address: 11232 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: HARVEY, MAUREEN
Address: 11232 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33772

Title: D (X) Delete
Name: PRENDERGAST, JEANNE M
Address: 11232 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33772

Title: D (X) Delete
Name: BATSON, MICHAEL
Address: 11232 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BATSON, KATHLEEN
Address: 19029 US 19N UNIT 11E
City-St-Zip: CLEARWATER, FL 33764

Title: D (X) Change () Addition
Name: HARVEY, MAUREEN
Address: 900 EDENVILLE AVE
City-St-Zip: CLEARWATER, FL 33764

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

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: KATHLEEN M BATSON

PRES

08/04/2008

Electronic Signature of Signing Officer or Director

Date