

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144103

Entity Name: BIO ORGANIC SPA, INC.

FILED
Jan 08, 2008
Secretary of State

Current Principal Place of Business:

ONE DATRAN CENTER SUITE 207
9100 S DADELAND BLVD
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

ONE DATRAN CENTER SUITE 207
9100 S DADELAND BLVD
MIAMI, FL 33156

New Mailing Address:

FEI Number: 87-0790459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEIR, RICHARD
ONE DATRAN CENTER SUITE 207
9100 S DADELAND BLVD
MIAMI, FL 33156 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WEIR, RICHARD
Address: 1 DATRAN CENTER S#207, 9100 S DADELAND BLV
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: KRIEGER, CAMILLE D
Address: 1 DATRAN CENTER S#207, 9100 S DADELAND BLV
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CAMILLE D. KRIEGER

V.P.

01/08/2008

Electronic Signature of Signing Officer or Director

_____ Date