

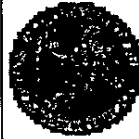
2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90248 005 ***158.75

DOCUMENT # P07000125650

1. Entity Name
ECOSCIENCE INTERNATIONAL INCORPORATED



Principal Place of Business
**9225 SW COVE POINT STREET
JUPITER, FL 33469**

Mailing Address
**9225 SW COVE POINT STREET
JUPITER, FL 33469**

2. Principal Place of Business - No P.O. Box #

19900 Mona Rd.

Suite, Apt. #, etc.

Suite 106

City & State

Tequesta, FL

Zip

33469

Country

USA

3. Mailing Address

19900 Mona Rd.

Suite, Apt. #, etc.

Suite 106

City & State

Tequesta, FL

Zip

33469

Country

USA



04162008

Chg-P

CR2E034 (12/06)

4. FEI Number

26-1443836

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MASHBURN, PERRY A
2863 NORTHLAKE BLVD
STE 9
LAKE PARK, FL 33403**

7. Name and Address of New Registered Agent

Name
John D. McLaughlin

Street Address (P.O. Box Number is Not Acceptable)

19900 Mona Rd.

Suite 106

City

Tequesta

FL

Zip Code

33469

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)

4/24/08

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
MARKS, STEVE
9225 SW COVE POINT STREET
JUPITER, FL 33469** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
MCLAUGHLIN, JOHN E
9225 SW COVE POINT STREET
JUPITER, FL 33469** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**President
John D. McLaughlin
19900 Mona Rd, Suite 106
Tequesta, FL 33469** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/08

Date

561-744-5558

Daytime Phone #